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: 020 7974 5713

For office use Date

Payee App. No. Fee

Application for tree works: works to trees subject to a tree preservation order (TPO) and/or notification of proposed works to trees in a conservation area.

Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

Publication of applications on planning authority websites

Fax

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

You must use this form if you are applying for work to trees protected by a tree preservation order (TPO). (You may also use it to give notice of works to trees in a conservation area).

It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed.

Applicant Name and Address		2. Agent Name and Address	
Title:	First name:	Title: MR First name: DEMIAN	
Last name:		Last name: PACE	
Company (optional):		Company PACE ARBORICULTURE	
Unit:	House number: House suffix:	Unit: House number: House suffix:	
House name:		House name: ALBANY HOUSE	
Address 1:		Address 1: PORTSLADE! RD	
Address 2:	4.44.44.44	Address 2:	
Address 3:		Address 3:	
Town:		Town: LONOON	
County:		County:	
Country:	· · · · · · · · · · · · · · · · · · ·	Country:	
Postcode:		Postcode: 6U83D5	

2011/1371/1

. Trees Location all trees stand at the address shown in Question 1, go to Question	4. Trees Ownership Is the applicant the owner of the tree(s): Yes No
Otherwise, please provide the full address/location of the site the tree(s) stand (including full postcode where available)	If 'No' please provide the address of the owner (if known and if different from the trees location)
	Title: MR First name: LEK
Init: House 64 House suffix:	Last name: JACKSON
ouse ame:	Company (optional):
address 1: ABERDARE GARDENS	Unit: House number: House suffix:
ddress 2:	House name:
ddress 3:	Address 1: ABERDARE GARDENS
OWN: LONDON	Address 2:
county:	Address 3:
Postcode of known): NW 6 300 ?	Town: LONDON
the location is unclear or there is not a full postal address, either	County:
lescribe as clearly as possible where it is (for example, 'Land to the ear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or	Country:
provide an Ordnance Survey grid reference:	Postcode: NWb
Description:	
LAND TO THE REAR	Country code: National number: Extension number:
	Country code: Mobile number (optional):
	07817604367
	Country code: Fax number (optional):
	Email address (optional):
	lee jachson @ btintenet.com
	LEE JACKSON OF WHENE ! I C S !!
5. What Are You Applying For?	6. Tree Preservation Order Details
	If you know which TPO protects the tree(s), enter its title or numbe
Are you seeking consent for works to tree(s) Yes No subject to a TPO?	below.
	NIA
Are you wishing to carry out works to tree(s) Yes No	10 (1
7. Identification Of Tree(s) And Description Of Works	44
Please identify the tree(s) and provide a full and clear specification on necessary. You might find it useful to contact an arborist (tree surge	on) for help with defining appropriate work. Where trees are
protected by a TPO, please number them as shown in the First Sche	dule to the TPO where this is available. Use the same numbers on
your sketch plan (see guidance notes). Please provide the following information below : tree species (and t	he number used on the sketch plan) and description of works. Where
trees are protected by a TPO you must also provide reasons for the v	work and, where trees are being felled, please give your proposals for
planting replacement trees (including quantity, species, position an E.g. Oak (T3) - fell because of excessive shading and low amenity value.	d size) or reasons for not wanting to replant. Replant with 1 standard ash in the same place.
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IXLIME - REMOV	E BROKEN BRANCHES
AND RESHAPE ALL	E BROKEN BRANCHES ORDINALY - APPROX DUCTION.
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Trees - Additional Inform	nation	- 1	
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ketch plan clearly showing the	position of trees listed in Question 7 must be provided when a	pplying for wo	orks to trees covered
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9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (c) related to a member of staff	Do any of these statements apply to you?
(b) an elected member (d) related to an elected member	☐ Yes ☐ No
If Yes, please provide details of the name, relationship and role	
•	
O. Application For Tree Works - Checklist	
	postion () is a second of the
Only one copy of the application form and additional information (Oumake sure that this form has been completed correctly and that all resupply precise and detailed information may result in your application but it may help you to submit a valid form.	levant information is submitted. Please note that fallura to
Sketch Plan	
 A sketch plan showing the location of all trees (see Question 	8)
For all trees	_
(see Question 7)	
Clear identification of the trees concerned	
 A full and clear specification of the works to be carried out 	
For works to trees protected by a TPO see Question 7)	
lave you:	
stated reasons for the proposed works?	
 provided evidence in support of the stated reasons? in particol 	War.
 If your reasons relate to the condition of the tree(s) - write 	
appropriate expert	The studence in Gill all
 if you are alleging subsidence damage - a report by an a 	ppropriate engineer or surveyor
and one from an arboriculturist. in respect of other structural damage - written technical	mildense
	ppropriate engineer or surveyor evidence
 included all other information listed in Question 8? 	
1. Declaration - Trees	
we hereby apply for consent/give notice for tree work as described in	this form and the accompanying plans and additional information.
gned - Applicant:	Or signed - Agent:
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ate (DD/MM/YYYY):	The state of the s
27/02/12 (This date must not be before the date of sending or hand-delivery of the form)	0
or sending or hand-delivery of the form)	
Applicant Contact Details	13. Agent Contact Details
lenhane numbers	-
Extension	Telephone numbers
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ail address (optional):	
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Electronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in the same manner.