po Consulta Email (enquiries only): env.devcon@camden.gov.uk For office use Planning Services 020 7974 1911 Date Telephone Camden Town Hall Fee 020,7974 5713 Pavee Argyle Street Fax App. No. London WC1H 8EQ 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 Publication of planning applications on planning authority websites Please note that with the exception of applicant contact details, the information provided on this application form and supporting documents may be published on the authority's website. If you have provided any other information as part of your application which falls within the definition of personal data under Data Protection Act which you do not wish to be published on the authority's website, please contact the authority's plann 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. 2. Agent Name and Address 1. Applicant Name and Address DAV, J First name: Title: Title: First name: Last name: Last name: HOGAN Company Company SEEKER TREE SERVICES (optional): (optional): House House House House Unit: Unit: number: suffix: number: suffix: House House SOSCASTLE HOUSE name: name: Address 1: Boscastle Don't Address 1: JEMFIELY Address 2: Address 2: Address 3: Address 3: Lowson Town: Town: LougITTON

County:

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Postcode:

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| 3, Trees Location  | 4. Trees Ownership  |  |  |  |
|--|---|--|--|--|
| If all troes stand at the address shown in Question 1, go to Question 4. Otl. vise, please provide the full address/location of the site where the tree(s) stand (including full postcode where available)   | Is the applicant the owner of the tree(s):  If 'No' please provide the address of the owner (if known and if different from the trees location)   |  |  |  |
| Unit: House House  | Title: First name:  |  |  |  |
| House sumix:   | Last name:  |  |  |  |
| Address 1:   | (optional): House House   |  |  |  |
| Address 2:   | House number: suffix:   |  |  |  |
| Address 3:   | name: Address 1:  |  |  |  |
| Town:  | Address 2:  |  |  |  |
| County:  | Address 3:  |  |  |  |
| Postcode<br>(if known):  | Town:   |  |  |  |
| If the location is unclear or there is not a full postal address, either   | County:   |  |  |  |
| describe as clearly as possible where it is (for example, 'Land to the rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or  | Country:  |  |  |  |
| provide an Ordnance Survey grid reference:  Description:   | Postcode:   |  |  |  |
|  | Telephone numbers Extension Country code: National number: number:  |  |  |  |
|  |   |  |  |  |
|  | Country code: Mobile number (optional):   |  |  |  |
|  | Country code: Fax number (optional):  |  |  |  |
| ÷  |   |  |  |  |
|  | Email address (optional):   |  |  |  |
| 5. What Are You Applying For?  |   |  |  |  |
| 3. What are rou applying ror:  | 6. Tree Preservation Order Details  If you know which TPO protects the tree(s), enter its title or number   |  |  |  |
| Are you seeking consent for works to tree(s) Yes No subject to a TPO?  | below.  |  |  |  |
| Annual distriction of the second seco | N/s   |  |  |  |
| in a conservation area? Yes No   |   |  |  |  |
| planting replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value. F   | on) for help with defining appropriate work. Where trees are dule to the TPO where this is available. Use the same numbers on the number used on the sketch plan) and description of works. Where work and, where trees are being felled, please give your proposals for disize) or reasons for not wanting to replant.  Replant with 1 standard ash in the same place. |  |  |  |
| TI LIME REMOVE SUCKERS OF  | 170 545 MA H-46, H  |  |  |  |
|  |   |  |  |  |

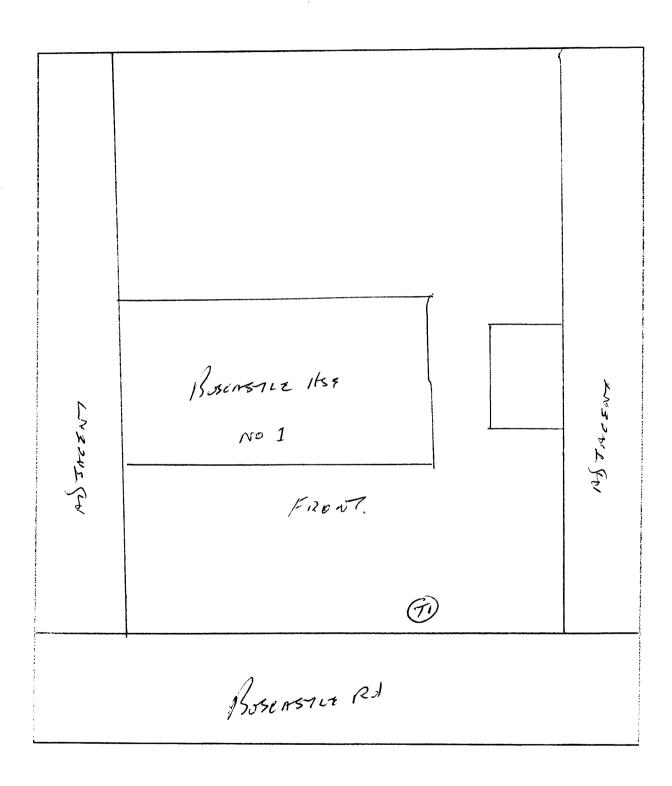
| W/H  |   |   |
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| $\mathcal{N}/\mathcal{P}$  |   |   |
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| Trees - Additional Information   |   |   |
| ditional information may be attached to electronic communications or provided separa   |   |   |
| and the second s | itely ili paper i   | ormat.  |
| ketch plan clearly showing the position of trees listed in Question 7 must be provided when a  | applying for wor  | rks to trees covered  |
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| 9. Application For Tree Works - Checklist   |                                      |   |
|---|--------------------------------------|---|
| Only ecopy of the application form and additional information (Question 8) is required. Please use the make are that this form has been completed correctly and that all relevant information is submitted. Please use the supply precise and detailed information may result in your application being rejected or delayed. You do but it may help you to submit a valid form. | ease note that failure t             | ю.                                      |
| Sketch Plan   |                                      |   |
| <ul> <li>A sketch plan showing the location of all trees (see Question 8)</li> </ul>  |                                      |   |
| 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 8)  | R                                    |   |
| Have you:   |                                      |   |
| <ul> <li>stated reasons for the proposed works?</li> </ul>  |                                      |   |
| <ul> <li>provided evidence in support of the stated reasons? in particular:</li> <li>if your reasons relate to the condition of the tree(s) - written evidence from an</li> </ul>   |                                      |   |
| <ul> <li>appropriate expert</li> <li>if you are alleging subsidence damage - a report by an appropriate engineer or surveyor</li> </ul>   |                                      |   |
| <ul> <li>and one from an arboriculturist.</li> <li>in respect of other structural damage - written technical evidence</li> </ul>  |                                      |   |
| • included all other information listed in Question 8?  |                                      |   |
| Carried an extremination listed in Question 6.  |                                      |   |
| 10. Declaration - Trees   |                                      |   |
| I/we hereby apply for consent/give notice for tree work as described in this form and the accompanying I  | plans and additional in              | formation.                              |
| Signed - Applicant: Or signed - Agent:  |                                      | **************************************  |
| (20312.11   |                                      |   |
| Date (DD/MM/YYYY):  |                                      |   |
| 9-2-10 (This date must not be before the date of sending or hand-delivery of the form)  |                                      |   |
| 11. Applicant Contact Details 12. Agent Contact Details   |                                      |   |
| Telephone numbers  Telephone numbers  Telephone numbers   |                                      |   |
| Extension   |                                      | Extension                               |
| National number   |                                      | number:                                 |
| Country code: Mobile number (optional): Country code: Mobile number (optional):   | <del>508-3832</del>  <br>(optional): |   |
|   |                                      |   |
| Country code: Fax number (optional): Country code: Fax number (optional)  | ional):                              |   |
|   | 8-0525                               |   |
| Email address (optional):  Email address (optional):  |                                      | · · · · · · · · · · · · · · · · · · ·   |
|   |                                      |   |
| Electronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in   | the same manner.                     |   |
| (Please see guidance notes)   |                                      |   |

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