Last name: BGMSDU Company Goptional): FOLSTLING MAMAGGILETT Unit: House number: 19 House suffix: House name: Address 1: Reo Road Address 2: Address 3: Town: BORGHANWOOD County: HGLTS Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country:	16/02/20	010 13:2	5 0181	-441-9777	- 1	G&R	TREE SURGE	EON I-F		PAGE 01
Carden Town Hall Anylor Street Lordon 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 Abdiress acts that the information provided on this application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in supporting documents may be published on the application form and in su				/{		lol	101°		Can	nden
and/or notification of proposed works to trees in a conservation area. Town and Country Planning Act 1990 Act 1990 Act 1990 Publication of applications on planning authority websites Please note that the information provided on this application form and in supporting documents may be published on the Authority's velocities by our require any further clarification, please contact the Authority's pleaning department. Please complete using bloc 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 it is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed. 1. Applicant Name and Address Title: M.L. First name: GAGJ Last name: BGGS J Address 1: BUSSCK MAY Address 2: Address 3: Town: BGGS AA MAY ACCE LGGS J Address 3: Town: BGGS AA MAY ACCE LGGS J Town: COCKLOSTELS Country: MGLS S	/ Car Ang Lon	nden Town I yle Street Idon WC1H (iell BEQ	Fax	: 020 : 020	7974 1911 7974 5713	90lc	Date Playee App. No	GA	/T
Publication of applications on planning authority websites Please note that the information provided on this application form and in supporting documents may be published on the Authority's websites. If you require any further clarification, please compete using block capitals and black ink. Tou must use this form if you are applying for work to trees protected by a tree preservation order (IPO), (You may also use it to give notice of works to trees in a conservation area. Please complete using block capitals and black ink. Tou must use this form if you are applying for work to trees protected by a tree preservation order (IPO), (You may also use it to give notice cannot be to tree 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 / 1. Applicant Name and Address Title: ML	Applic	ation fo	r tree wo	orks: works	s to trees	subject	to a tree	preserv	ation c	rder (TPO)
Publication of applications on planning authority websites Please note that the Information provided on this application form and in supporting documents may be published on the Authority's websites. If you require any further derification, please contact the Authority's pleasing department. Please complete using block capitals and back 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 it is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application/notice cannot proceed. 1. Applicant Name and Address Title: ML		and/or	notificat	tion of pro	posed w	orks to t	rees in a	conserv	ation a	rea.
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 (IPO), (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. 1. Applicant Name and Address Title: ML First name Gracy	The same	(83	1	Town and	Country	/ Plannir	ng Act 19	90		
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. 1. Applicant Name and Address Title: ML First name: GALD Last name: BCLSAU Company (optional): FOLSTUNG MANAGGMENT Unit: House number: 19 House Number: 47 House number: 47 House name: Address 1: Reo Caro Address 3: Address 3: Town: BOLCMAN WORD County: MCLSS Country: Country	Please note ti	hat the infor	mation pro-	rided on this an	olication for	n and he can	porting docu Authority's p	mants may	be publish pertment	ộđ on the
Title: ML First name: GAMY Last name: BCMSOU Company: FOLSUNG MANAGGMENT Unit: House number: 19 House suffix: Unit: House number: 47 Mouse suffix: House name: Address 1: Reo Road Address 2: Address 3: Town: BORGMAN WOOD County: HGLATS Country: Coun	Please comple You must use t notice of work It is important	ete using bloc this form if you to trees in a that you read	k capitals and u are applyle	d black ink, ng for work to tre	ees protected	by a tree pre	servation orde	er (TPO), (You	(may also i	⊭e It to give
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Company (optional): FORSTUNE MANAGEMENT Unit: House number: 19 House Unit: House number: 49 House name: Address 1: Leo Road Address 2: Address 3: Address 3: Town: BORCHAHWADD TOWN: BORCHAHWADD County: HELTS County: HELTS Country: Cou	Title:	MC F	irst name: G	ing		Title:	ME	First name:	Richa	מאג
Unit: House number: 19 House suffix: Unit: House number: 47 House name: Address 1: 8ussex May Address 2: Address 3: Address 3: Town: Cockes 7eks County: Heles	Last name:	BENSON				Last name:	Kamish			
House name: Address 1: Leo Rapo Address 2: Address 3: Town: Bolic Har wap 0 Town: County: House number: 47 Pouse suffic House name: Address 1: Sussex Way Address 3: Town: County: House number: 47 Pouse suffic Town: County: County	Company (optional):	Fortune	MARKA	BGRH ENT			G+R1	TILLE SI	v L G 60-	2
Address 1: Reo Road Address 2: Address 3: Sussex Way Address 3: Town: Borcharwood County: Heles County: Hel	Unit:	Hou	se ber: 19			Unit:			47	House suffice
Address 2: Address 3: Town: Bokkhammador Town: Cockhammador County: Helles County: C	House name:									:
Address 3: Town: Bokeham wapp Town: Cockham reks County: Heles County: Heles County: Heles County: Heles	Address 1:	Leo Ro,	0			Address 1:	Sussex	WAY		
Town: Bokehamwood Town: Cockhortens County: McLes County: McLes County: McLes County: McLes	Address 2:					Address 2:				
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1	Location					4. Trees	Ownership	<u> </u>	***************************************		-
If all trees s	tand at the add	ress sho	wn in Ques	tion 1, ga	to Questio	ls the applic	cant the own	er of the tree	[s]: [""]	Yes	<u>~</u> /
where the t	e, please provi tree(s) stand (in	de the fi cluding	ull address/i full postcoo	ocation of le where	f the site available)	I I If 'No' pleas	e provide the nown and if di	أدكم ومنجاطاته	ليا ما		 ✓N
Unit:	Hk nu	use mber:	(3	Hous		Title:		Filst name:			
House name:						Läst name: Company			-		
Address 1:	BELSIZ	e Cr	Apv C			(optional); Unit:	Н	ouse		House	
Address 2:					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	House	n n	umber:		suffix	<u>L</u>
Address 3:						name:					
Town:	LOWBON	ř				Address 1; Address 2;					
County:						11					
Postcode (if known):	NW3 4	цХ				Address 3:					
if the locatio	n is unclear or	there is	not a full po	stal addr	ess, either	County:					
rear of 12 to	:learly as possil 18 High Street Ordnance Surv	or Woo	odland adini	ample, 'L ning Elm	and to the Road') or	Country:					
Description:		yyndr	515151UC;			Postcode:				·	
						T elephone n		· · · · · · · · · · · · · · · · · · ·		Fv	tension
						Country cod	le: National	number:			mber:
						Country cod	e: Mobile n	umber (optie	Septile		
									or reasy.		
					ĺ	Country code	e: Fax num	ber (optional);		
						E					
					,	Email addres	s (optional):			· · · · · · · · · · · · · · · · · · ·	
E What A	V A										
o. What Al	re You Appl	ying F	DY7			6. Tree Pre					
Are you seek	ing consent fo	r works	to tree(s)	-/	—	If you know w below.	hich TPO pro	tects the tree	e(s), enter its	title or i	number
subject to a	TPO?] Yes	☐ No						···
Are you wish	ing to carry ou	t works 1	to tree(s)	Yes	□No			:			
			<u></u>		ز		W.,				
7. klentific	ation Of Tr	10(5) A	nd Descri	ption C	of Works						
necessary. Yo	y the tree(s) ar u might find it	id provid useful to	de a full and o contact an	clear spe arborist	cification of (tree surged	the works you v	want to carry	out. Continu	e on a segan	ate shee	et if
your sketch p	lan (see guida	ce note	e)	A411 (1) E14E	r rust scheo	nie to the I MO A	vnere this is #	vailable. Usp	the same nu	mbers o	on
Please provid	e the following	inform:	stion helow	: tree spe	cles (and th	e number used	on the sketch	gian) and de	escription of	works V	Where
planting repla	cement trees	Includin	or organitive	enaciae e	113 (O) (I)E W	ork arks, where t	rises are bein	g felled, plea	se give your	proposi	als for
	Tall Occupacy	WCC331AE	a racing an	и юж аты	enny value. I	eplant with 1 sta	ındard ash in t	he same plac	te.		
3 A54	Che	ic Ca	J.E .v:T.ES	· •	⊐™ A F €	by 30%	Kenna	va Denie) Web a		
l waser	Cheson			. ጥட	منظ ہے	25 %					
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Keasou.	s: Gren	GABL	MAINTE.	40466	_ Wo	ces Reau	estes L	y wear	, Bou K		
								\$Dute:	200 0/02/24 14/0-12	() — — —	

7. Identification Of	Tree(s) And Description Of Works continued		
	3 ASH		
	MORSE CHESTNUT		
**************************************	BELSIZE GROVE		
or all trees sketch plan clearly showle y a TPO. A sketch plan is a would also be helpful if you or works to trees covered lease indicate whether the sust be accompanied by the	reasons for carrying out the proposed works include any of the following. (he necessary evidence to support your proposals. (See guidance notes for full the necessary evidence to support your proposals.)	g for we (see gui	orks to trees covered Idance notes). ur application letails)
diagnostic info	required to provide written arboricultural advice or other ormation from an appropriate expert. Property - e.g. subsidence or damage to drains or drives.	Yes	
Subsidence A report by and repair Other struc	i dance to because ion	nonitori oposals	ing data, soil, roots
Documents and plans (for Are you providing separate		- _{Yes} .	[√No
If YES, please provide the r If they are being provided	eference numbers of plans, documents, professional reports, photographs of separately from this form, please detail how they are being submitted.	etc in si	apport of your application.

16/02/2010 13:25	1	G & R TREE SURGEON	PAGE 04
I .	ne Works - Checklist		
Tmuc sand tridit fills IAIIII	lcation form and additional information (has been completed correctly and that all ad information may result in your applicat amit a valid form.	POLON/AMP INFORMACION IS SUBJECTED PARTY.	J
Sketch Plan			
 A sketch plan sho 	wing the location of all trees (see Question	on 8)	
For all trees (see Question 7)			
	n of the trees concerned		
	ecification of the works to be carried out		
For works to trees protection 8)	ted by a TPO		,
Have you:			
	the proposed works?		
If your reaso	e in support of the stated reasons? in part as relate to the condition of the tree(s) - w ate expert	icular: ritten evidence from an	
 if you are all 	ging subsidence damage - a report by an	appropriate engineer or surveyor	<u></u>
and one	from an arboriculturist. other structural damage - written technic	· ·	.
-	Information listed in Question 8?	a evere	브
A HELUGED AN OTHER	PRIORITION listed in Question 81		
10. Declaration - Tree I/we hereby apply for conse Signed - Applicant: Date (DD/MM/YYYY):	nt/give notice for tree work as described	in this form and the accompanying plans Or signed - Agent:	and additional information.
16/02/2010	(This date must not be before the date of sending or hand-delivery of the form)		
11. Applicant Contac	Details	12. Agent Contact Details	
Telephone numbers		Telephone numbers	/
Country code: National r	Extension umber: number:	Country code: National number:	Extension number:
			9777
Country code: Mobile nu	mber (optional):	Country code: Mobile number (opti	onal):
Country and a			
Country code: Fax numb	er (optional):	Country code: Fax number (options	The state of the s
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(Please see guidance notes)	If you submit this form by fax or e-mail th	e LPA may communicate with you in the	same manner.
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