## RECEIVED 09 NOV





**Planning Services** Camden Town Hall **Arayle Street** London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk

Telephone

Fax

: 020 7974 1911 : 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**

## 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 in 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 the Data Protection Act which you do not wish to be published on the authority's website, 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.

once currier process.	
I. Applicant Name and Address	2. Agent Name and Address
Title: R First name: Paul	Title: First name:
Last name: MACQUEETEN	Last name:
Company (optional): Modern ARB SERVICE	Company (optional):
Unit: House House suffix:	Unit: House number: House suffix:
House name: Was RELD NURSKELLES	House name:
Address 1: Cock order Land	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town:
County:	County:
Country:	Country:
Postcode: Nwg 7NB,	Postcode:

if all trops standard	4. Trees Ownership
If all trees stand at the address shown in Question 1, go to Question 4. Otherwise, please provide the full address/location of the site where the tree(s) stand (ir aluding 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 number: 4 ( House suffix:	Title: First name:
House name: ELSWIRTHY ROSS.	Last name: Company
Address 1:	(optional):
Address 2:	Unit: House number: House suffix:
Address 3:	name:
Town:	Address 1:
County:	Address 2:
Postcode (if known): Nws	Address 3:
If the location is unclear or there is not a full and the	Town:
rear of 12 to 18 High Street' or 'Woodland adjoining The Day 19	County:
provide an Ordinance Survey grid reference:	Country:
Description:	Postcode:
ACCESS: Daran 07590586304	Telephone numbers  Country code: National number: Extension
075915585301	Country code: National number: number:
	Country code: Mobile number (optional):
	Country and
	Country code: Fax number (optional):
	Email address (optional):
. What Are You Applying For?	6. Tree Preservation Order Details
No. 190 April 19	If you know which TPO protects the tree(s), enter its title or number below.
Are you seeking consent for works to tree(s) Yes No	below.
re you wishing to carry out works to tree(s)	
a conservation area? Yes No	
Identification Of Tree(s) And Description Of Works	
ease identify the free(s) and provide a full and alleged	ne works you want to carry out. Continue on a separate sheet if
ecessary. You might find it useful to contact an arborist (tree surgeon) rotected by a TPO, please number them as shown in the First Schedule our sketch plan (see guidance notes).	for help with defining appropriate work. Where trees are
ease provide the following information below to the second	
anung replacement trees (including quantity and its and its	for the creek are being felled, please give vour proposals for
g. Oak (T3) - fell because of excessive shading and low amenity value. Rep	lant with 1 standard ash in the same place.
$\bigcap_{i=1}^{n}$	
V (O.	

\$Date: 2008/08/27 10:36:10 \$ \$Revision: 4.0

7. Identification Of Tree(s) And Description Of Works continued			
REAR CROWN REDUCK 20% + SHAF	₹.		
TI WALDUT.			
ELSWORTHY RD.			
8. Trees - Additional Information  Additional information may be attached to electronic communications or provided separat	ely in paper fo	ormat.	
For all trees  A sketch plan clearly showing the position of trees listed in Question 7 must be provided when ap by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation It would also be helpful if you provided details of any advice given on site by an LPA officer.	oplying for wor area (see guid	ks to trees covered lance notes).	
For works to trees covered by a TPO Please indicate whether the reasons for carrying out the proposed works include any of the follow must be accompanied by the necessary evidence to support your proposals. (See guidance notes	ving. If so, you s for further det	r application tails)	
1. Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall:  If YES, you are required to provide written arboricultural advice or other  diagnostic information from an appropriate expert.			
2. Alleged damage to property - e.g. subsidence or damage to drains or drives.  If YES, you are required to provide for:  Yes No		┌ No	
Subsidence A report by an engineer or surveyor, to include a description of damage, vegetation, monitoring data, soil, roots and repair proposals. Also a report from an arboriculturist to support the tree work proposals.			
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of	damage and po	ossible solutions.	
Documents and plans (for any tree)  Are you providing separate information (e.g. an additional schedule of work for Question 7)?	Yes	☐ No	
If YES, please provide the reference numbers of plans, documents, professional reports, photogr If they are being provided separately from this form, please detail how they are being submitted	aphs etc in sup l.	port of your application.	

9. Application For Tree Works - Checklist				
Only one copy of the application form and additional information (Question 8) is required. Please use the guidance and this checklist to make sure that this form has been completed correctly and that all relevant information is submitted. Please note that failure to supply precise and detailed information may result in your application being rejected or delayed. You do not need to fill out this section, but it may help you to submit a valid form.				
Sketch Plan				
<ul> <li>A sketch plan showing the location of all trees (see Question</li> </ul>	n 8)			
For all trees (see Question 7)  Clear identification of the trees conserved.	_			
<ul> <li>Clear identification of the trees concerned</li> <li>A full and clear specification of the works to be carried out</li> </ul>				
A full and clear specification of the works to be carried out				
For works to trees protected by a TPO (see Question 8)				
Have you:				
<ul><li>stated reasons for the proposed works?</li></ul>				
<ul> <li>provided evidence in support of the stated reasons? in partice</li> <li>if your reasons relate to the condition of the troots) and</li> </ul>	cular:			
<ul> <li>if your reasons relate to the condition of the tree(s) - wr appropriate expert</li> </ul>				
<ul> <li>if you are alleging subsidence damage - a report by an a and one from an arboriculturist.</li> </ul>	appropriate engineer or surveyor			
• in respect of other structural damage - written technica	al evidence			
• included all other information listed in Question 8?				
	<b>U</b>			
10. Declaration - Trees				
I/we hereby apply for consent/give notice for tree work as described in				
	Or signed - Agent:			
Men				
Date (DD/MM/YYYY):				
(This date must not be before the date of sending or hand-delivery of the form)				
the state of the following of the following				
11. Applicant Contact Details	12. Agent Contact Details			
Telephone numbers Extension	Telephone numbers			
Country code: National number: number:	Country code: National number: Extension number:			
952675 Country code: Mahille and an (coding 1)				
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
Country code: Fax number (optional):				
Country code: Fax number (optional):	Country code: Fax number (optional):			
Email address (optional):	Email address (optional):			
	Email accress (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)