		<b>1/10</b>	2009/4879/T.	amden
(	Planning Services Camden Town Hall Argyle Street London WC1H 8EQ		v.devcon@camdeli.gov.y Eor office use 0 7974 1911 0 7974 5713 6107 10 5 - App. No.	Fee
А	pplication for tree	works: works to tree	es subject to a tree preservati	on order (TPO)
	and/or notifi	ication of proposed v	works to trees in a con <del>s</del> ervation	on area.
		Town and Count	ry Planning Act 1990	
Pleas	e note that with the exce	plications on planning aut eption of applicant contact d published on the authority's we	etails, the information provided on this	application form and in
lf you Data	have provided any other i	nformation as part of your app	blication which falls within the definition of on the authority's website, please contact	personal data under the the authority's planning

Please complete using block capitals and black ink.

v

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	2. Agent Name and Address			
Title: MR First name: DAVID	Title: First name:			
Last name: BUCKNETC	Last name:			
Company (optional):	Company (optional):			
Unit: House number: 24 House suffix:	Unit: House House suffix:			
House name: GARDEN FCAT	House name:			
Address 1: OPPIDANS BOAD	Address 1:			
Address 2:	Address 2:			
Address 3:	Address 3:			
Town: LONDON	Town:			
County:	County:			
Country:	Country:			
Postcode: NW3 3A6	Postcode:			

3. Trees Location	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 (including full postcode where available)	Is the applicant the owner of the tree(s): Yes No If 'No' please provide the address of the owner (if known and if different from the trees location)
Unit: House House Suffix:	Title: MR First name: DAVID
House name:	Last name: BUCK MEU Company
Address 1:	(optional): Unit: House House
Address 2:	House ST. AN DREWS
Address 3:	Address 1: BAYVIEW RD
Town:	Address 2:
County:	Address 3:
Postcode (if known):	Town: KINGSBOWN
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 provide an Ordnance Survey grid reference: Description:	County:       Image: Country:         Postcode:       Image: Country for the formal of the form
5. What Are You Applying For?	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.
Are you wishing to carry out works to tree(s) Yes Y No	
7. Identification Of Tree(s) And Description Of Works	
Please identify the tree(s) and provide a full and clear specification of necessary. You might find it useful to contact an arborist (tree surgeo	the works you want to carry out. Continue on a separate sheet if on) for help with defining appropriate work. Where trees are

protected by a TPO, please number them as shown in the First Schedule 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 the number used on the sketch plan) and description of works. Where trees are protected by a TPO you must also provide reasons for the work and, where trees are being felled, please give your proposals for planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant. *E.g. Oak (T3) - fell because of excessive shading and low amenity value. Replant with 1 standard ash in the same place.* 

ONE LIME TREE IN FRONT GARDEN CAUSING CRACK ING OF CONCRETE INCLUSING RAISING OF PAVING TO ENTRANCE TO GARDEN FLAT. THE TREE IS ALSO EXCLUDING AIGHT FROM THE HOOSE, INCLUDING GARDEN, RAISED GROUND, FIRST AND SECOND FLOOR. APPLYING TO REDUCE CROWN, AND REDUCE

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

STEM B	84 A	TH IN								
• TREE TO REDUCE	23	24	25	··· ·						
Entranz C Santes F. PT.	OPP.	•   / / / / D A /	4- , NS	FRON LOP,	T 6.9.CO.	ÐV ·				
3. Trees - Additiona	al Inform	ation			·····					
Additional information	may be at	tached to	electro	onie comr	munications	or provided se	eparately	<b>y in paper f</b> e	ormat.	
or all trees	wing the p	osition of t	trees lis	ted in Oue	estion 7 must	a provided w		wing for wor		a success of
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## 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 8)</li> </ul>	K
For all trees (see Question 7) • Clear identification of the trees concerned	V
<ul> <li>A full and clear specification of the works to be carried out</li> </ul>	V
For works to trees protected by a TPO (see Question 8)	
Have you:	
<ul> <li>stated reasons for the proposed works?</li> </ul>	<b>Z</b>
<ul> <li>provided evidence in support of the stated reasons? in particular:</li> </ul>	
<ul> <li>if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert</li> </ul>	
<ul> <li>if you are alleging subsidence damage - a report by an appropriate engineer or surveyor and one from an arboriculturist.</li> </ul>	
<ul> <li>in respect of other structural damage - written technical evidence</li> </ul>	
<ul> <li>included all other information listed in Question 8?</li> </ul>	

10. Declaration - Trees					
I/we hereby apply for consent/give notice for tree work as described in this form and the accompanying plans and additional information.					
Signed - Applicant:	Or signed - Agent:				
Collid Jours					
Date (DD/MM/YYYY):					
(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				
Extension	Extension				
Country code: National number: number:	Country code: National number: number:				
0/304-373880 -					
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
078036/2059					
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
Rasmusbuck a aol.com					

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)