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Planning Services Camden Town Hall Aravie Street London WC1H 8EO Email (enquiries only): env.devcon@camden.gov.uk Telephone

: 020 7974 1911 : 020 7974 5713 For Office use

Date

Payer App. No.

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.

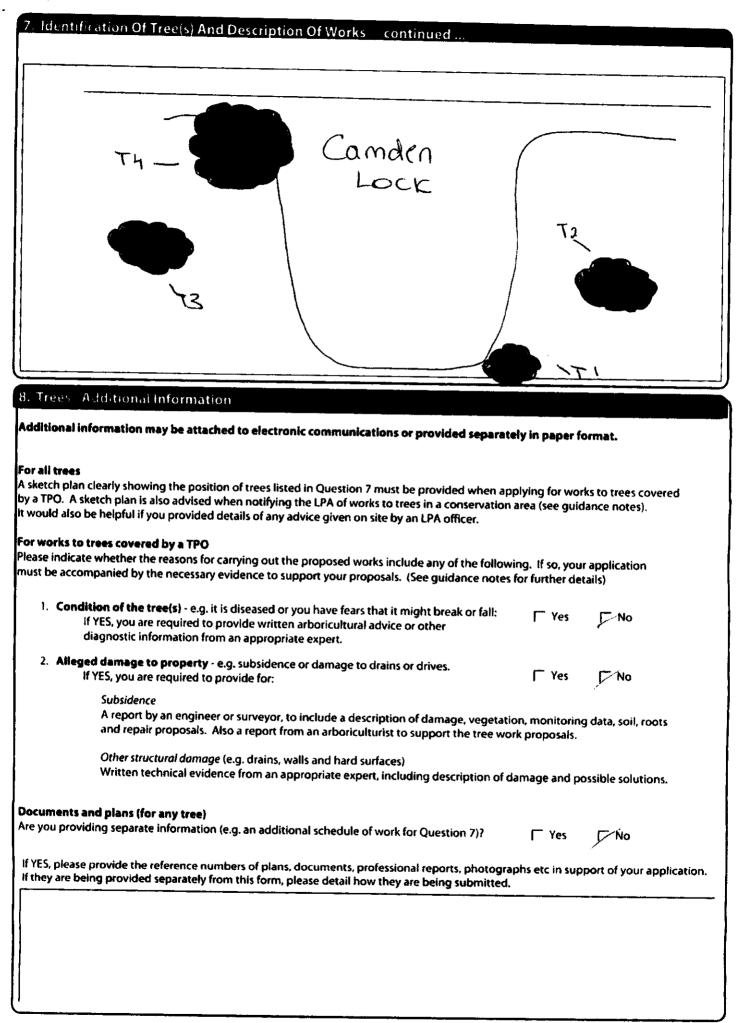
Please complete using block capitals and black ink.

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.

Applicant Name and Address		2. Agent Name and Address	
Title:	First name:	Title:	First name:
Last name:		Last name:	
Company (optional):	Northside Sendaments Uto	Company (optional):	Treeccre
Unit:	House Suffix:	Unit:	House House suffix:
House name:		House name:	Oak Tree House
Address 1:	Campton Lock Place	Address 1:	Posebork Works
Address 2:	Chalk form Road	Address 2:	Rose bank way
Address 3:		Address 3:	[· - ·]
Town:		Town:	
County:		County:	
Country:		Country:	
Postcode:	NW 18AF	Postcode:	W36771

3. Tries 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)	No			
Unit: House SUffix:	Title: First name: Last name:				
House name: Address 1: Conclan Lock Pace	Company (optional):	· <u>.</u> =			
Address 2: Chark farm Roco	Unit: House House suffix: House name:	. =			
Address 3: Town:	Address 1:	1 			
County:	Address 2:	_ =			
Postcode (if known): JULI SAF	Address 3: Town:				
If the location is unclear or there is not a full postal address, either 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	County:	- -			
provide an Ordnance Survey grid reference: Description:	Postcode:				
	Telephone numbers Extension	วก			
	Country code: National number: number	•			
	Country code: Mobile number (optional):				
	Country code: Fax number (optional):				
	Email address (optional):				
5. What Are You Applying For?	6. Tree Protovotion Cyday Davile				
If you know which TPO protects the tree(s), enter its title or number below.					
subject to a TPO? Are you wishing to carry out works to tree(s) in a conservation area? Yes 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 surgeon protected by a TPO, please number them as shown in the First Schedu your sketch plan (see guidance notes). Please provide the following information below: tree species (and the trees are protected by a TPO you must also provide reasons for the worplanting replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value. Reference of the second services in the second services of the second second services of the second services of the second second services of the second	n) for help with defining appropriate work, Where trees are ule to the TPO where this is available. Use the same numbers on a number used on the sketch plan) and description of works. Where ork and, where trees are being felled, please give your proposals for size) or reasons for not wanting to replant.	e ir			
See e	ttached Ladule				
Sc	hadule				



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	,					
 A sketch plan showing the location of all trees (see Question 	n 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 	<u></u>					
For works to trees protected by a TPO (see Question 8)						
Have you:						
 stated reasons for the proposed works? 	Ø					
 provided evidence in support of the stated reasons? in parti if your reasons relate to the condition of the tree(s) - w appropriate expert 						
 if you are alleging subsidence damage - a report by an and one from an arboriculturist. 	appropriate engineer or surveyor					
 in respect of other structural damage - written technical 	al evidence					
 included all other information listed in Question 8? 						
	,					
10. Declaration - Trees						
	in this form and the accompanying plans and additional information.					
Signed - Applicant:	Or signed Agent:					
Date (DD/MM/YY/Y):						
(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: National number: number:	Country code: National number: number:					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
Country code: Fax number (optional):	Country code: Fax number (optional):					
020 72677695	020 89932828					
Email address (optional):	Email 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.

(Please see guidance notes)