		> 10	Cam	den
	Planning Services Camden Town Hall Argyle Street London WC1H 8EQ	Email (enquiries only): env.devcon@camden.gov.uk Telephone : 020 7974 1911 Fax RECEIVED	For office use Date Payee App. No.	Fee
~		works: works to trees in a cation of the proposed works to trees to the proposed works to	conservation ar	

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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 website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

2009/3847

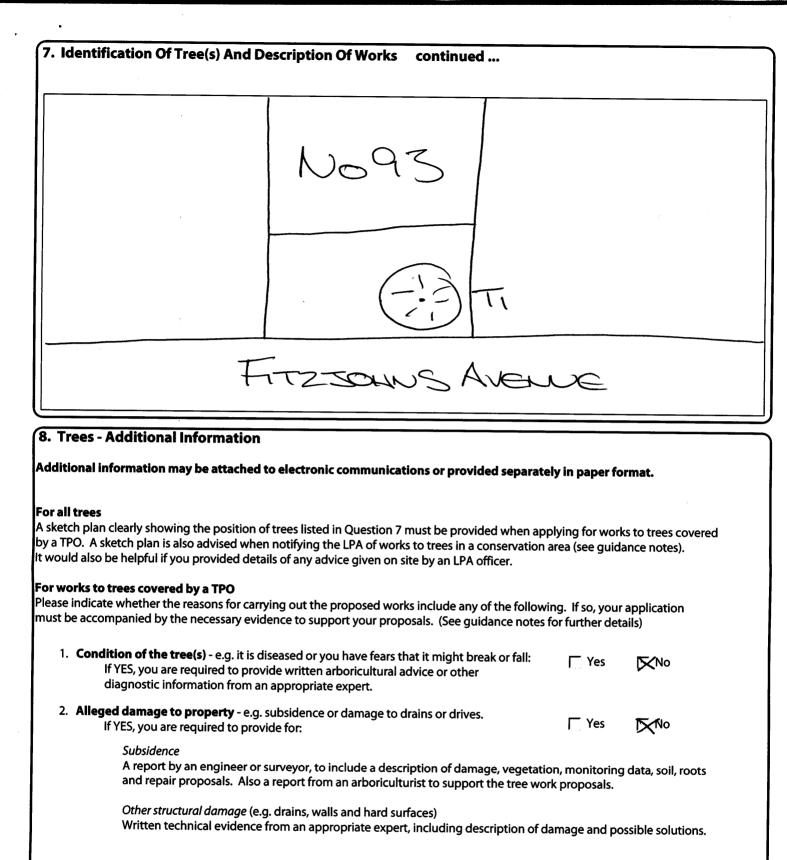
You must use this form if you are applying for work to trees protected by a tree preservation order (TPO). (You may also use it to give notice of works to trees in a conservation area).

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: MS First name: CLAIRE	Title: MR First name: SHAUN	
Last name: WATSON	Last name: MCLEAN	
Company (optional):	Company (optional): THE LONDON TREE G.	
Unit: House number: 93 House suffix:	Unit: House House suffix:	
House name: GARDANFLAT	House name: RUSH GREENHALL	
Address 1: FITZSOHNSAVE	Address 1:	
Address 2:	Address 2:	
Address 3:	Address 3:	
Town: LONDON	Town: RUSH GREEN	
County:	County: HERTS	
Country:	Country:	
Postcode: NUS GNX	Postcode: SS137SD	

3. Trees Location	4. Trees Ownership	
If all trees stand at the address shown in Question 1, go to Questior 4. Otherwise, please provide the full address/location of the site where the tree(s) stand (including full postcode where available)	If 'No' please provide the address of the owner (if known and if different from the trees location)	
Unit: House House suffix:	Title: First name: Last name:	
House name:	Company	
Address 1:	(optional): Unit: House House	
Address 2:	House suffix:	
Address 3:	Address 1:	
Town:	Address 2:	
County:	Address 3:	
Postcode (if known):	Town:	
f 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	
	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 Preservation Order Details	
Amount of the second second	If you know which TPO protects the tree(s), enter its title or numb below.	
Are you seeking consent for works to tree(s) Yes No		
Are you wishing to carry out works to tree(s) Yes No		
7. Identification Of Tree(s) And Description Of Works		
Please identify the tree(s) and provide a full and clear specification on necessary. You might find it useful to contact an arborist (tree surge protected by a TPO, please number them as shown in the First Sche your sketch plan (see guidance notes). Please provide the following information below : tree species (and t	of the works you want to carry out. Continue on a separate sheet if con) for help with defining appropriate work. Where trees are edule 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 fo d size) or reasons for not wanting to replant	
TI = LIMETREE, CROWN REDUCE BY 30%. AND CROWN LIFT TO LIMETRES		

\$Date: 2009/02/24 14:34:12 \$ \$Revision: 4.3 \$



Documents and plans (for any tree)

Are you providing separate informatio	(e.g. an additional schedule of work for Question 7)?
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∏ Yes □ ▼No

If YES, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application. If they are being provided separately from this form, please detail how they are being submitted.

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

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 A sketch plan showing the location of all trees (see Question 8) 	\boxtimes
For all trees	
(see Question 7)	
 Clear identification of the trees concerned 	\boxtimes
• 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:	
 stated reasons for the proposed works? 	
 provided evidence in support of the stated reasons? in particular: 	
 if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert 	
 if you are alleging subsidence damage - a report by an appropriate engineer or surveyor and one from an arboriculturist. 	
 in respect of other structural damage - written technical evidence 	
 included all other information listed in Question 8? 	

10. Declaration - Trees

/we hereby apply for consent/give noti	ce for tree work as described in this form and the accompanying plans and additional information.
Signed - Applicant:	Or signed - Agent: /

Date (DD/MM/YYYY): SIS(O) (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 Extension number: Country code: National number: Country code: 2014352358 Mobile number (optional): Mobile number (optional): Country code: Fax number (optional): Email address (optional): Image: Country code:	Telephone numbers Extension Country code: National number: LLLL SUSED26105 Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): 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)