

Camden Town Hall Argyle Street London WC1H 8EQ	: 020 7974 5713	Date Payee App. No.	Fee
Application for tree works	works to trees subject to a t	ree preservation	n order (TPO)
and/or notification	of proposed works to trees in	n a conservation	n area.
14	with and Country Planning Act		ortal.gov.uk/apply
Publication of applications on plan	3		
Please note that the information provided	on this application form and in supporting		
Authority's website. If you require any fur	ther clarification, please contact the Author	ity's planning departm	ent.
notice of works to trees in a conservation are	r work to trees protected by a tree preservation		
1. Applicant Name and Address	2. Agent Name	and Address	
Title: MR First name: F	Title:	First name:	
Last name: RAWLEY	Last name:		
Company (optional):	Company (optional):		
Unit: House number: 79	House suffix: (a) Unit:	House number:	House suffix:
House 79 a Belsize Li	House name:	*****	
Address 1:	Address 1:		
Address 2:	Address 2:	480	
Address 3:	Address 3:		
Town: LONDAN	Town:		
County:	County:		
Country:	Country:		7
Postcode: NW3 5AV	Postcode:		

2013/1864/T

3. Trees Location		4. Trees Ownership
If all trees stand at the address shown in Question 1 4. Otherwise, please provide the full address/location where the tree(s) stand (including full postcode who	on of the site	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)
	louse uffix:	Title: First name:
House name:		Last name: 19 BELSIZE LANE LTD Company (optional): 45 or beve
Address 1:		(optional): As a bave Unit: House 79 House
Address 2:		House Number: // sumx:
Address 3:		Address 1: 79 BELSIZE LAKE
Town:		Address 2:
County:		Address 3:
Postcode (if known):		Town: LONDON
describe as clearly as possible where it is (for examper of 12 to 18 High Street or 'Woodfland adjoining provide an Ordnance Survey grid reference: Description:		Country: Postcode: NW3 5AV Telephone numbers Country code: National number: OD 44 0207 586 2663 Country code: Mobile number (optional): PO 44 026 67802 157 216 Country code: Fax number (optional): PO 44 027 586 3141 Email address (optional): ATAUCCY D bt whereals Com
5. What Are You Applying For?	7	6. Tree Preservation Order Details
Are you seeking consent for works to tree(s) $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	es 🗌 No	If you know which TPO protects the tree(s), enter its title or number below.
Are you wishing to carry out works to tree(s) in a conservation area?	es 🗆 No	Conservation area
necessary. You might find it useful to contact an ari protected by a TPO, please number them as shown your sketch plan (see guidance notes). Please provide the following information below: tr	ar specification of borist (tree surged in the First Sched ee species (and the reasons for the we ecies, position and	

I Ash tree standing in the boundary of 79/01 Belsize land in first and overhanging belsize land. Removing deld wood and branch overhanging belsize land

5Date: 2010-09-10 #5 \$Revision: 2999 5

	79 Belsize Live 87 Belsize (Store FECT WAY BELSIZE LANE	nue	
3			
			==4
Trees - Additiona	Information		
would also be helpful if or works to trees cover ease indicate whether to ust be accompanied by	ne reasons for carrying out the proposed works include any of the follo the necessary evidence to support your proposals. (See guidance note	wing. If so, yo	ur application
If YES, you are	ree(s) - e.g., it is diseased or you have fears that it might break or fall: required to provide written arboricultural advice or other ormation from an appropriate expert.	☐ Yes	☐ No
If YES, you are	o property - e.g. subsidence or damage to drains or drives. required to provide for:	☐ Yes	├─ No
and repai	e y an englineer or surveyor, to include a description of damage, vegetat proposals. Also a report from an arboriculturist to support the tree we ctural damage (e.g., drains, walls and hard surfaces)		g data, soil, roots
	chnical evidence from an appropriate expert, including description of	damage and p	ossible solutions.
	crimeal evidence work an appropriate expert including description of		
ocuments and plans (f re you providing separa		☐ Yes	┌ No

9. Futhority Employee / M			
With respect to the Authority, I am (a) a member of staff (b) an elected member (d) n	lember n: elated to a member of staff elated to an elected member	Do any of these statem	ents apply to you?
if Yes, please provide details of the	e name, relationship and role	□ res	∏we
10. Application For Tree We	orks - Checklist		
Only one copy of the application for make sure that this form has been supply precise and detailed inform but it may help you to submit a vai	orm and additional information completed correctly and that a ation may result in your applic ad form.	n (Question 8) is required. Please use the all relevant information is submitted. Ple tation being rejected or delayed. You do	guidance and this checklist to ase note that failure to not need to fill out this section
Sketch Plan			
 A sketch plan showing the 	location of all trees (see Ques	tion 8)	5 /
For all trees (see Question 7)			U
 Clear identification of the t 	trees concerned		-/
 A full and clear specification of the works to be carried out 			
for works to trees protected by a see Question 7)			W
lave you:			
 stated reasons for the prop 	osed works?		_
 If your reasons relate t 	ort of the stated reasons? in pa to the condition of the tree(s) -	articular; 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 stru 	ictural damage - written techn	nical evidence	
 included all other information listed in Question 8? 			
. Declaration - Trees			
e hereby apply for consent/give no	otice for tree work as describe	d in this form and the accompanying pla	ms and additional information
med - Applicant:		Or signed - Agent:	—
	e m	ì	
		·	
		13. Agent Contact Details	
		Telephone numbers	
		The second secon	
	1	Country code: National number:	Extension number:
		Country code: National number: Country code: Mobile number (op	number;

Email address (optional):

Email address (optional):

Sooner this form by tax or a final the LPA may communicate with you in the same manner.

(Please see guidence notes)