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

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

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

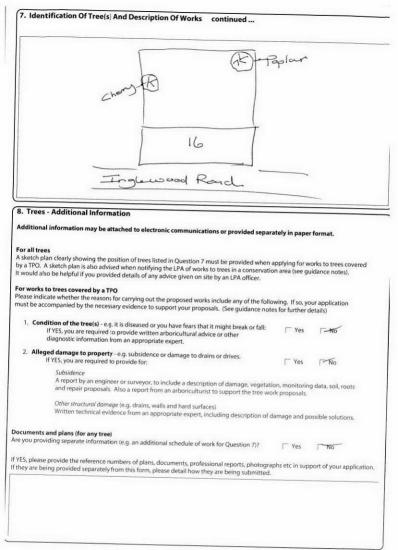
Title: First name: First name: First name: Shown

1. Applic	ant Name and Address	2. Agent Name and Address				
Title:	MC First name: '	Title: MR First name: Shaun				
Last name:	Bullas	Last name: Mclean				
Company (optional):		Company (optional): The London Tree Company Ltd				
Unit:	House number: 16 House suffix:	Unit: House number: 72 House suffix:				
House name:		House name:				
Address 1:	Inglewood Road	Address 1: High Street				
Address 2:		Address 2: High Street Address 2: Guilden Morden.				
Address 3:		Address 3: SE Cames				
Town:	Lordon	Town:				
County:		County:				
Country:		Country:				
ostcode:	NW6 192	Postcode: SG8 QJS				

4. Otherwise, pl	l at the address show ease provide the full s) stand (including fu	address/location of	the site	If 'No' please i	nt the owner of the tree(s): provide the address of the wn and if different from the	Yes trees location)	
	House	House		Title:	First name:		
Unit:	number:	suffix:		Last name:			
House name:				Company			
Address 1:				(optional):	House	House	a
Address 2:			7	House	number:	suffix:	
Address 3:				name:			
Town:				Address 1:			
County:				Address 2:			
Postcode		1		Address 3:			
(if known):				Town:			
If the location is	unclear or there is no ly as possible where i	t a full postal addres	ss, either	County:			
rear of 12 to 18 F	ligh Street' or 'Woodl	and adjoining Elm R	nd to the Road') or	Country:			
	ance Survey grid refe	rence:					
Description:				Postcode: Telephone nur			
				Country code:	National number:		Extension
					Tradicital Harriotti.		iumber.
				Country code:	Mobile number (optiona	ıl):	
				Country code:	Fax number (optional):		
				Email address			
				Email address (optional):		-
5. What Are Y	ou Applying For	?			ervation Order Detail		
Are you seeking o subject to a TPO	consent for works to	tree(s) Yes	☐ No	If you know whi below.	ch TPO protects the tree(s)	, enter its title o	r numbei
Are you wishing t in a conservation	o carry out works to t area?	tree(s) Yes	□ No				
Please identify the necessary. You mi protected by a TP rour sketch plan (* Please provide the rees are protected planting replacem of a Oak (T3) - fell b	O, please number the see guidance notes). e following informatio d by a TPO you must ient trees (including o ecause of excessive sh	a full and clear speci ontact an arborist (t em as shown in the f on below : tree speci also provide reason: quantity, species, po ading and low amen	ification of the tree surgeon, First Schedul ies (and the s for the work osition and sinity value, Rep	e to the TPO wh number used on k and, where tre ze) or reasons fo plant with 1 stand	nt to carry out. Continue of effining appropriate work. We ere this is a vailable. Use the the sketch plan) and descress are being felled, please or not wanting to replant. I and as his in the same place.	Where trees are a same numbers ription of works give your propo	s on
Cherry 6				luce to	previos p	oints	
G	reneral r	Maintena	nea				

4. Trees Ownership

3. Trees Location



9. Authority Employee / Member With respect to the Authority, I am:				
(a) a member of staff (c) related to a	a member of staff an elected member	Do any of these statemen	e statements apply to you?	
If Yes, please provide details of the name, re		Yes	No	
10. Application For Tree Works - Ch	necklist			
Only one copy of the application form and at make sure that this form has been completed supply precise and detailed information may but it may help you to submit a valid form.	dditional information (Questi	on 8) is required. Please use the gunt information is submitted. Pleaseing rejected or delayed. You do no	uidance and this checklist to note that failure to t need to fill out this sectio	
Sketch Plan				
 A sketch plan showing the location of 	of all trees (see Question 8)			
For all trees (see Question 7)			I I	
Clear identification of the trees conce	erned		T	
 A full and clear specification of the w 	rorks to be carried out			
For works to trees protected by a TPO see Question 7)			И	
Have you:				
stated reasons for the proposed work				
provided evidence in support of the s if your reasons relate to the conc appropriate expert				
 if you are alleging subsidence da and one from an arboricultur. 	oriate engineer or surveyor			
 in respect of other structural dam 	nage - written technical evide	nce		
 included all other information listed in 				
I. Declaration - Trees we hereby apply for planning permission/cons ormation. I/we confirm that, to the best of my nuline opinions of the person(s) giving them. gned - Applicant:	ent as described in this form . //our knowledge, any facts sta	and the accompanying plans/drav	vings and additional given are the	
ite (DD/MM/YYYY);				
27 8 14 (This date must not be of sending or hand-d	oe before the date delivery of the form)			
Applicant Contact Details	13. Ac	gent Contact Details		
ephone numbers	The same of the sa	one numbers		
	in I	y code: National number:	Extension	
	08	45 6026105	number:	
	Countr	y code: Mobile number (option.	al):	
	07	919 358587		
	Country	y code: Fax number (optional):		
	Email	ddress (optional):		
	In	athelondontreeco	0	
a you supmit this form	Dy lax or e-mail tho In	communicate with you in the san	ompany. Co. UK	
se see guidance notes)	-, - an or e-mail the LPA may	communicate with you in the san	ne manner.	