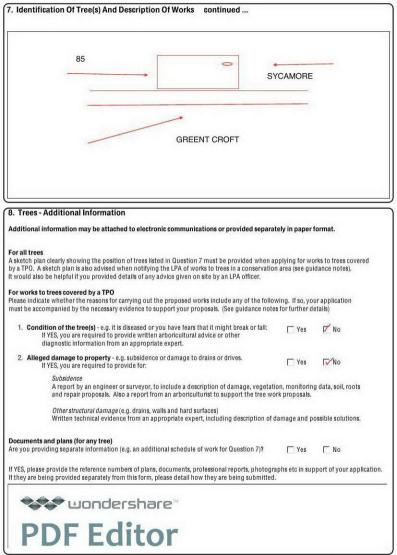


(3. Trees Location	4. Trees Ownership	
If all trees stand at the address shown in Question 1, go to Question 4. Otherwise, please provide the full address/location of the site where the tree(s) stand (including full postcode where available)	Is the applicant the owner of the tree(s): Yes No If "No" please provide the address of the owner (if known and if different from the trees location)	
	Title: First name:	
Unit: House House suffix:	Last name:	
House name:	Company	
Address 1:	(optional): House House	
Address 2:	House number: suffix:	
Address 3:	name: Address 1:	
Town:	Address 2:	
County:	Address 3:	
Postcode		
(if known): If the location is unclear or there is not a full postal address, either	Town:	
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:	Country:	
Description:	Postcode:	
	Telephone numbers Extension Country code: National number: number:	
	Country code: Mobile number (optional):	
	Country code: Fax number (optional):	
	Country code: Fax number (optional):	
	Email address (optional):	
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 below.	
Are you seeking consent for works to tree(s) Yes No subject to a TPO?		
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 of necessary. You might find it useful to contact an arborist (tree surgec protected by a TPO, please number them as shown in the first Sched your sketch plan (see guidance notes). Please provide the following information below: tree species (and th trees are protected by a TPO you must also provide reasons for the w planting replacement trees (including quantity, species, position and £_0.0 ax (TS) - felb because of excessive shading and low amenity value.	on) for help with defining appropriate work. Where trees are fulle to the TPO where this is available. Use the same numbers on the number used on the sketch plan) and description of works. Where rork and, where trees are being felled, please give your proposals for is tell or reasons for not wanting to replant.	
T1: SYCAMORE 12 METERS: WONDERS THE TOTAL METERS TO THE TOTAL MET		
PDF Editor REDL	JCTION	



9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (d) related to an elected member	Do any of these statements apply to you? ☐ Yes ☐ No
If Yes, please provide details of the name, relationship and role	
10. Application For Tree Works - Checklist	
make sure that this form has been completed correctly and that all r	Question 8) is required. Please use the guidance and this checklist to relevant information is submitted. Please note that failure to oon being rejected or delayed. You do not need to fill out this section
Sketch Plan	
 A sketch plan showing the location of all trees (see Question) 	on 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.	브
Trial and diear epochication of the works to 50 carried out	
For works to trees protected by a TPO (see Question 7)	
Have you:	
 stated reasons for the proposed works? 	
 provided evidence in support of the stated reasons? in part if your reasons relate to the condition of the tree(s) - v 	
 if you are alleging subsidence damage - a report by ar 	n appropriate engineer or surveyor
 and one from an arboriculturist. in respect of other structural damage - written technic 	cal evidence
 included all other information listed in Question 8? 	
11. Declaration - Trees /we hereby apply for planning permission/consent as described in t information. Live confirm that, to the best of my/our knowledge, any penuine opinions of the person(s) giving them.	y facts stated are true and accurate and any opinions given are the
Signed - Applicant:	Or signed - Agent:
	AMCGAULEY
Date (DD/MM/YYYY): 02/05/2014 (This date must not be before the date of sending or hand-delivery of the form)	
2. Applicant Contact Details	13. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number:	Country code: National number: Extensio
National number.	0207 3720082
Country code: Mobile number (optional):	Country code: Mobile number (optional):
	07931807928
Country code: Fax number (optional):	Country code: Fax number (optional):
wondershare™	
Email address (optional):	Email address (optional):
DDE Editor][
lectronic communication - If you submit this form by fax or e-mail t	he LPA may communicate with you in the same manner.