

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk For office use : 020 7974 1911 Telephone

: 020 7974 5713

Date Payee

App. No.

Fee

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

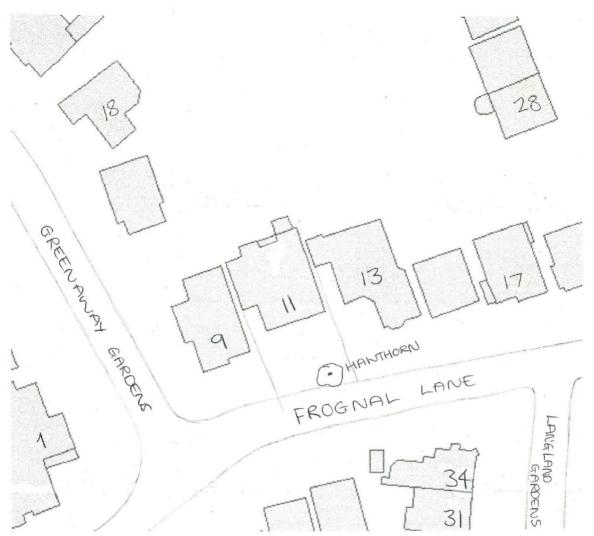
Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

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		2. Agent Name and Address		
Title:	First name: MARY	Title: First name:		
Last name:	RDEN	Last name:		
Company (optional):		Company (optional): CUSTOM CUTTERS TREE SPECIALISTS LTC		
Unit:	House number: House suffix:	Unit: House number: 46 suffix:		
House name:		House name:		
Address 1: F	ROGNAL LANE	Address 1: STANLEY ROAD		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	-0N00N	Town: LONDON		
County:		County:		
Country:		Country:		
Postcode:	UW3 7DG	Postcode: NI 2LE		



NII 2LE

CLIENT
MARY ARDEN
II, FROGNAL LANE,
LONDON,
NW3 70G

AGENT
CUSTOM CUTTERS TREE SPECIALISTS LTD
46, STANLEY ROAD,
LONDON,

3. Trees Loca	tion		4. Trees Owi		_/ _
f all trees stand a	t the address shown in Q	uestion 1, go to Quest	tion Is the applicant	the owner of the tree(s):	Yes No
. Otherwise, plea	ase provide the full addre stand (including full pos	ess/location of the site	owner (if knowr	ovide the address of the and if different from the t	rees location)
mere the tree(s)	and thereating ran pos		Title:	First name:	
Jnit:	House number:	House suffix:	Last name:		
louse	number		Company		
name:			(optional):		House
Address 1:			Unit:	House number	House suffix:

. Identification Of Tree(s) And Description Of Works continued					
		9			
8. Trees - Additional Information					
Additional information may be attached to electronic communications or provided separate	ely in paper fo	ormat.			
For all trees A sketch plan clearly showing the position of trees listed in Question 7 must be provided when ap by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation It would also be helpful if you provided details of any advice given on site by an LPA officer.	oplying for wor a area (see guid	ks to trees covered dance notes).			
For works to trees covered by a TPO Please indicate whether the reasons for carrying out the proposed works include any of the follow must be accompanied by the necessary evidence to support your proposals. (See guidance note:	ving. If so, you s for further de	r application etails)			
 Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall: If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert. 	☐ Yes	□ No			
 Alleged damage to property - e.g. subsidence or damage to drains or drives. If YES, you are required to provide for: 	☐ Yes	┌ No			
Subsidence A report by an engineer or surveyor, to include a description of damage, vegetati and repair proposals. Also a report from an arboriculturist to support the tree wo	ion, monitorin ork proposals.	g data, soil, roots			
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of damage and possible solutions.					
Documents and plans (for any tree) Are you providing separate information (e.g. an additional schedule of work for Question 7)?	☐ Yes	☐ No			
If YES, please provide the reference numbers of plans, documents, professional reports, photogr If they are being provided separately from this form, please detail how they are being submitted	aphs etc in su I.	pport of your application.			

9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (d) related to a member of staff (b) an elected member If Yes, please provide details of the name, relationship and role	Do any of these statements apply to you? ☐ Yes ☐ No			
10. Application For Tree Works - Checklist Only one copy of the application form and additional information (Ques make sure that this form has been completed correctly and that all relevant supply precise and detailed information may result in your application but it may help you to submit a valid form.	vant information is submitted. Please note that failure to			
A sketch plan showing the location of all trees (see Question 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				
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 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? 				
11. Declaration - Trees I/we hereby apply for consent/give notice for tree work as described in Signed - Applicant: Date (DD/MM/YYYY): 21/12/2015 (This date must not be before the date of sending or hand-delivery of the form)	this form and the accompanying plans and additional information. Or signed - Agent:			
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (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)