

Application for tree works: works to trees subject to a preservation order (TPO) and/or notification of proposed works to trees in conservation areas (CA). Town and Country Planning Act 1990

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this pplication form and in supporting documents may be published on the council's website.

f you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Please complete using block capitals and black ink. t is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Title: MRS First name: SARAH Last name: HTELT Company (optional): (Company (optional): (Applicant Name and Address		2. Agent Name and Address		
Company (optional): Unit:	Title:	MRS First name: SARAH	Title: First name:		
(optional): Unit: House number: 18 House suffix: House name: Address 1: Hourcroft Avenue Address 2: Address 3: Town: HAMPSTEAD County: London Country: Country: Country: Country: Country: Country: Country:	Last name:	HJELT	Last name:		
House name: Address 1: Hourcrapt Avenue Address 3: Town: Hampstead County: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country: Country:	Company (optional):		Company (optional):		
name: Address 1: HOUYCROFT AVENUE Address 2: Address 3: Town: HAMPSTEAD County: LONDON Country: Country: Country:		number: Suffix:			
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Town: HAMPSTCAD Town: County: Country: Country:	Address 2:		Address 2:		
Town: HAMPSTCAD Town: County: Country: Country:	Address 3:		Address 3:		
Country: Country:	Town:		Town:		
	County:	LONDON	County:		
Postcode: NW3 7Q L Postcode:	Country:		Country:		
	Postcode:	NW3 7QL	Postcode:		

3. Trees Location	4. Trees Ownership
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): If 'No' please provide the address of the owner (if know and if different from the trees location)
Unit: House number: House suffix:	Title: First name:
House name:	Last name:
Address 1: HOLLYCROFT AVENUE	Company
Address 2:	(optional): Unit: House House
Address 3:	House Surfix:
Town: HAMPSTEAD	name: Address 1:
County: LONDON	Address 2:
Postcode (if known): NW3 7QL	Address 3:
If there is not a full postal address, describe as clearly as possible where it is (for example, 'Land to the rear of 12 to 18 High Street' or	Town:
"Woodland adjoining Main Road") or provide a grid reference: Easting:	County:
Northing:	Country:
	Postcode:
Description:	Telephone numbers Extension 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
Are you wishing to carry out works to tree(s) in a Conservation Area (CA)?	Do you know the title of the Tree Preservation Order (TPO)? If Yes, please provide the title of the TPO:
Are you seeking consent for works to tree(s) Subject to a Tree Preservation Order (TPO)? Yes No	
include a sketch plan showing position(s) of the tree(s) in relation to	f the works you want to carry out. Enter the species of the tree(s) and buildings, named roads and boundaries. n as shown in the First Schedule to the Tree Preservation Order (for
example T3 Oak; two Beech and one Birch in G2; seven Ash in A1; syd	
SILVER BIRCH TREE IN BACK GARD OVERALL HEIGHT AND SIZE B TALL & THIN & OUR NEIGHBOURS DO THIS. CROWN REDUCTION.	DEN OF NO.18. TO REDUCE Y APPROX 30%, IT'S VERY AT NO.20 HAVE ASKED US TO
You might find it helpful to consult a tree surgeon to clarify what nee	eds to be done.
Please state the reference number you have given the plan:	

ase state the reasons for carrying out th	e proposed works on the	tree(s):			
PROPOSED TREE S	URGEON:			(5)	M.S.
BERTRAND MAURE					
	o R				
C.U.T.S. (CREATIVE	E URBAN T	ree surg	icry)		
2, ACACIA RD.			54		
ACTON					
LONDON					
W3 GHF	(11)				
ase indicate whether the reasons for ca		orks include any of th	e following. If s	o, your appl	ication must be
alth or safety of the tree(s) - e.g. it is dis		reak or fall:	Yes	▼ No	
es, information required - report by a t	-		al		
riser).			Yes	No No	
eged subsidence damage:			162	A MO	
cription of property damage; sub-soil und and building movement through vicinity and its management since disc	type and shrinkage pote a distortion survey and/o covery of the damage.	ntial; location of any	roots found an	d their iden	tification; history
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To. Application for free Works - checklist					
Please use this checklist to ensure that the form has been completed For works to trees protected by a Tree Preservation Order, failure to s application being rejected or delay in dealing with it. In particular, you	upply sufficiently precise and detailed information may result in your				
3 copies of a completed and dated application form. 🗹					
3 copies of a sketch plan showing the location of all tree(s).	lacktriangledown				
3 copies of a full and clear specification of the works to be carried out	:. 🔲				
3 copies of a statement of reasons for the proposed work.					
safety of the tree(s).	old provide: t or horticultural adviser) if your reasons relate to the health and/or thone from a tree professional (arboriculturist) if you are alleging				
For works to trees in conservation areas, it is important to supply pred wish to provide the following: 3 copies of a completed and dated form, with all questions answered					
3 copies of a sketch plan showing the precise location of all tree(s).					
$3\ \mbox{copies}$ of a full and clear specification of the works to be carried out					
Whether the trees are protected by a TPO or in a conservation area, please indicate which of the following types of additional information you are submitting (3 copies of each need to be provided):					
- photographs. M					
- report by a tree professional (arboriculturist) or other.					
- details of any assistance or advice sought from a Local Planning Aut	hority officer prior to submitting this form.				
11. Declaration - Trees I/we hereby apply for consent/give notice as described in this form an	nd the accompanying plans and additional information.				
Signed - Applicant:	Or signed - Agent:				
Date (DOTMINITTY): 21/02/2016 (date cannot be pre-application)	100 2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
12. Applicant Contact Details	13. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country Code: National purpher: Extension number:	Country code: National number: Extension number:				
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Country code: Mobile number (optional): Country code: Fax number (optional):				
Erraii address (Optional).	Email address (optional):				