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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 luthority's website. If you require any further clarification, please contact the Authority's planning department.

'lease complete using block capitals and black ink.

ou 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 otice of works to trees in a conservation area).

is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / otice cannot proceed.

Applicant Name and Address	2. Agent Name and Address		
Fitle: First name: ANTONY	Title: First name:		
ast name: WY LAM	Last name:		
Company optional):	Company (optional):		
Jnit: House number: 21 House suffix:	Unit: House House suffix:		
louse lame:	House name:		
Iddress 1: 27 WMITEHALL PARK	Address 1:		
ddress 2:	Address 2:		
.ddress 3:	Address 3:		
own: LONDON	Town:		
ounty:	County:		
ountry:	Country:		
ostcode: NI9 3TS	Postcode:		

3. Trees Location	4. Trees Ownership Is the applicant the owner of the tree(s): If 'No' please provide the address of the owner (if known and if different from the trees location)		
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)			
Unit: House number: 113 House suffix:	Title: First name: SCHDNA  Last name: Company		
Address 1: //3 A GREEN CROFT WARDEN S Address 2:	(optional):  Unit: House number: 113 /1 House suffix:		
Address 3: Town: Lan Dan County:	Address 1: Show Mach Address 2: Address 3:		
Postcode (if known):  If the location is unclear or there is not a full postal address, either 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 provide an Ordnance Survey grid reference:  Description:	Town: County: Country: Postcode:		
	Telephone numbers  Country code: National number:  Don't 372 6955  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):		
Are you seeking consent for works to tree(s)	5. Tree Preservation Order Details  f you know which TPO protects the tree(s), enter its title or number selow.		
subject to a TPO?  Are you wishing to carry out works to tree(s) Yes No			
Please identification Of Tree(s) And Description Of Works Please identify the tree(s) and provide a full and clear specification of the necessary. You might find it useful to contact an arborist (tree surgeon) for oteeted by a TPO, please number them as shown in the First Schedule your sketch plan (see guidance notes). Please provide the following information below: tree species (and the numbers are protected by a TPO you must also provide reasons for the work planting replacement trees (including quantity, species, position and size i.g. Oak (T3) - fell because of excessive shading and low amenity value. Replacement trees (including quantity and shading and low amenity value. Replacement trees (including and low amenity value. Replacement trees).  Placement The because of excessive shading and low amenity value. Replacement trees (including and low amenity value. Replacement trees).  Placement The because of excessive shading and low amenity value. Replacement trees (including and low amenity value. Replacement trees).  Please provide the following information below: tree species (and the numbers are provide reasons for the work planting replacement trees).  Please provide the following information below: tree species (and the numbers are provide reasons for the work planting replacement trees).  Please provide the following information below: tree species (and the numbers).  Please provide the following information below: tree species (and the numbers).	umber used on the sketch plan) and description of works. Where and, where trees are being felled, please give your proposals for each with 1 standard ash in the same place.		

### For all trees

A sketch plan clearly showing the position of trees listed in Question 7 must be provided when applying for works to trees covered by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation area (see guidance notes). It would also be helpful if you provided details of any advice given on site by an LPA officer.

## For works to trees covered by a TPO

Please indicate whether the reasons for carrying out the proposed works include any of the following. If so, your application nust be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)

1.	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	T. MO
2,	Alleged damage to property - e.g. subsidence or damage to drains or drives.  If YES, you are required to provide for:	┌ Yes	[\sqrt{No}
	Subsidence A report by an engineer or surveyor, to include a description of damage, vegetation and repair proposals. Also a report from an arboriculturist to support the tree work	), monitoring	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.

e you providing separate information (e.g. an additional schedule of work for Question 7)?	□ Yes	- Á	
YES, please provide the reference numbers of plans, documents, professional reports, photographey are being provided separately from this form, please detail how they are help as a high separately from this form, please detail how they are help as a high separately from the separately		√No port of your appl	ication

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 the	se statements apply to you?  No
If Yes, please provide details of the name, relationship and role		
		•
10. Application For Tree Works - Checklist		
	(0 - 1 - 0)	*
Only one copy of the application form and additional information make sure that this form has been completed correctly and that a supply precise and detailed information may result in your application but it may help you to submit a valid form.	relevant information is subm	itted Dieses note that fall and
Sketch Plan		
A sketch plan showing the location of all trees (see Quest)	on 8)	
For all trees (see Question 7)		
<ul> <li>Clear identification of the trees concerned</li> </ul>		
<ul> <li>A full and clear specification of the works to be carried out</li> </ul>	:	D
For works to trees protected by a TPO (see Question 7)		
Have you:		
• stated reasons for the proposed works?		
<ul> <li>provided evidence in support of the stated reasons? in par</li> <li>if your reasons relate to the condition of the tree(s) - v appropriate expert</li> <li>if you are alleging subsidence damage - a report by at and one from an arboriculturist.</li> <li>in respect of other structural damage - written technic</li> <li>included all other information listed in Question 8?</li> </ul>	vritten evidence from an nappropriate engineer or surv	eyor
11. Declaration - Trees		
I/w hereby apply for consent/give notice for tree work as described	in this form and the accompar	nying plans and additional information
Signed - Applicant:	Or signed - Agent:	
Date (DD/MM/YYYY).  (This date must not be before the date		
of sending or hand-delivery of the form)		
12. Applicant Contact Details	13. Agent Contact Det	ails
Telephone numbers	Telephone numbers	
Country code: Programmer: Extension er:	Country code: National n	Extension umber: number:
		duniber.
Country code: A	Country code: Mobile nur	mber (optional):
Country code: Fax number (optional):	Country code: Fax number	
	Pax number	er (optional):
Email address (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) SCare = 2016-09-10 = \$ SRevision. 2999 \$