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

## ilication of applications on planning authority websites

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

se complete using block capitals and black ink.
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
ce of works to trees in a conservation area).
important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application /
ce cannot proceed.

Applicant Name and Address	2. Agent Name and Address			
le: First name:	Title: MRG First name: DIANE			
st name: ALL HALLOWS CHURCH.	Last name: ROCKELL			
ompany ptional):	Company (optional):			
nit: House House suffix:	Unit: House 10 House suffix:			
ouse ame:	House name:			
ddress 1: SAVERNAKE ROAD	Address 1: DEAN CLOSE			
ddress 2:	Address 2:			
ddress 3: GOSPEL OAK	Address 3:			
OWN: HAMPSTEAD	Town: UXBRIXE			
County: LONDON	County: MIDDLESEX			
Country: UX	Country: UK			
Postcode: NW3 2LD	Postcode: UB 10 9LB			

rees Location	4. Trees Ownership
trees stand at the address shown in Question 1, go to Question therwise, please provide the full address/location of the site re 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 known and if different from the trees location)
House House	Title: First name:
number: suffix:	Last name: ALL HALLOWS CHURCH.
186	Company (optional):
Iress 1:	Unit: House House suffix:
Iress 2:	House name:
iress 3:	Address 1:
vn:	Address 2:
ınty:	Address 3:
tcode (nown):	Town:
le location is unclear or there is not a full postal address, either	County:
cribe as clearly as possible where it is (for example, 'Land to the rof 12 to 18 High Street' or 'Woodland adjoining Elm Road') or	Country:
ovide an Ordnance Survey grid reference:	Postcode:
scription:	Telephone numbers Extension
WEST FRONT OF CHURCH IN SHIRLOCK ROAD	Country code: National number: number:
SAIRLOCK RUND	Country code: Mobile number (optional):
	oddinay ooddi. Information (openinary)
	Country code: Fax number (optional):
	Email address (optional):
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.
re you seeking consent for works to tree(s) Yes Jobiect to a TPO?	
re you wishing to carry out works to tree(s)	
1 a conservation area?	
. Identification Of Tree(s) And Description Of World	(S
lease identify the tree(s) and provide a full and clear specification	n of the works you want to carry out. Continue on a separate sheet h
rotected by a TPO, please number them as shown in the First Sc	hedule to the TPO where this is available. Use the same numbers on
our sketch plan (see guidance notes). Lease provide the following information below: tree species (an	d the number used on the sketch plan) and description of works. Where
rees are protected by a TPO you must also provide reasons for tr	and size) or reasons for not wanting to replant.
i.g. Oak (T3) - fell because of excessive shading and low amenity val	ue. Kepiant with i standard asii in the same place.
FELL DUE TO DOMAGE TO	PAVING + HEIGHT OF TREE AND
CLOSENESS TO BUILDING	SOUTHS ME
SHALL DEVELOPMENT DOE TO	START VERY SOON TO SOUTHS DE LANDSCAPING TO WEST FRONT AS DEN. TREE WILL BE REPLACED BY
IN BTURNS HARROAD RI COM	DEN. ILEE WITT

MORE	90	MABL	e of	NAMEL	MIN TRE	SE.			: Y
IT	15	ALS	0 0	VERSH	ADONED	8-1	COONCIL	FWWO	
LARG	76	PLAN	ET	REE	WHICH	0 V+	ERHANGS	STHE	AREA.
THER	2E	19	A	WAP	MEMOR	IAL	WITHI	NA	FEW
FEE	T	OF	THE	ASA	TREE	V	VHICH	WED	ONG
NA	NT	TO	BE	D	MAGED				

## **Trees - Additional Information**

iditional information may be attached to electronic communications or provided separately in paper format.

iditional information may be attached to electronic communications of provided sopulation	,	
r all trees sketch plan clearly showing the position of trees listed in Question 7 must be provided when ap a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation would also be helpful if you provided details of any advice given on site by an LPA officer.	plying for work area (see guid	ks to trees covered ance notes).
or works to trees covered by a TPO ease indicate whether the reasons for carrying out the proposed works include any of the follow ust be accompanied by the necessary evidence to support your proposals. (See guidance notes	ring. If so, your for further det	rapplication tails)
<ol> <li>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.</li> </ol>	Yes	
<ol> <li>Alleged damage to property - e.g. subsidence or damage to drains or drives.</li> <li>If YES, you are required to provide for:</li> </ol>	√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	on, monitoring rk 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 c	damage and po	ossible solutions.
Documents and plans (for any tree) Are you providing separate information (e.g. an additional schedule of work for Question 7)?		
f YES, please provide the reference numbers of plans, documents, professional reports, photogr	aphs etc in sup I.	port of your applicatio

on. If they are being provided separately from this form, please detail how they are being submitted.

Docs	FROTT E ALRE	ARCH	SUBAL TECT	ATTA	PHOTO'S	BY	EMAIL
T6	MRS MO	LHOORP	١.				

Authority Employee / Member  1 respect to the Authority, I am: 2 member of staff an elected member (d) related to an elected member	Do any of these statements apply to you?				
es, please provide details of the name, relationship and role					
CAURCHWARTEN TREASUR	EF -				
Application For Tree Works - Checklist	the standard of the standard o				
y one copy of the application form and additional information (Question 8) see sure that this form has been completed correctly and that all relevant information may result in your application being relit may help you to submit a valid form.	ormation is submitted. Please note that failure to				
etch Plan					
<ul> <li>A sketch plan showing the location of all trees (see Question 8)</li> </ul>					
'all trees					
e Question 7)	R				
<ul> <li>Clear identification of the trees concerned</li> <li>A full and clear specification of the works to be carried out</li> </ul>					
r works to trees protected by a TPO e Question 7)					
ve you:	_				
<ul><li>stated reasons for the proposed works?</li></ul>	$\sqcup$				
<ul> <li>provided evidence in support of the stated reasons? in particular:</li> <li>if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert</li> <li>if you are alleging subsidence damage - a report by an appropriate engineer or surveyor</li> </ul>					
and one from an arboriculturist.					
<ul> <li>in respect of other structural damage - written technical eviden</li> </ul>	ce				
<ul><li>included all other information listed in Question 8?</li></ul>					
te hereby apply for planning permission/consent as described in this form a ormation. I/we confirm that, to the best of my/our knowledge, any facts stanuine opinions of the person(s) giving them.  gned - Applicant:  ate (DD/MM/YYYY):    14   02   20   7     This date must not be before the date of sending or hand-delivery of the form)	and the accompanying plans/drawings and additional ted are true and accurate and any opinions given are the				
2. Applicant Contact Details 13. A	gent Contact Details				
	hone numbers Extension				
	itry code: National number: number:				
	895 239749.				
ioditity code: Monte named (operation).	ntry code: Mobile number (optional):				
	to code. For sumber (entings):				
Country code: Fax number (optional):	ntry code: Fax number (optional):				
	il address (optional):				
Email address (optional):	il dudiess (optional).				

lectronic 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)