

## 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 application form and in supporting documents may be published on the council's website.

If 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. It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: M.A. First name:
Last name: BLACKMUIL	Last name: Huc
Company (optional):	Company (optional):
Unit: House number: 18 House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: ROCHESTER SQUARE	Address 1: GRASMERE ROAD
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town:
County:	County:
Country:	Country:
Postcode: NW1	Postcode: NO 207

3. Trees Loc			4. Trees Ov	vner <b>s</b> hip	A A A A A A A A A A A A A A A A A A A
Full address/loa	cation of the site where the tree(s) sta here available)	nd (including	Is the applican	t the owner of the tree(s):	Yes N
			If 'No' please p	rovide the address of the and if different from the tre	
Unit:		ouse Iffix:	Title:		
House name:				First name:	
Address 1:			Last name:	And the second s	
Address 2:			Company (optional):		
nuuress z.			Unit:	House	House
Address 3:			House	number:	suffix:
Town:			name:		
County:			Address 1:		
ostcode			Address 2:	· N	
fknown):	ill portal address describes and a		Address 3:		
here it is (for e	full postal address, describe as clearly example, 'Land to the rear of 12 to 18	High Street or	Town:		1.0
Voodland adjo	ining Main Poad') or provide a grid re	ference:	County:		
asting:					
orthing:		Section of Control Control of	Country:		
Description:			Postcode:	100000000000000000000000000000000000000	
- 35.1011.			Telephone nun	nbers	Extension
			Country code:	National number:	number
					\$2,000 \$ 520
			Country code:	Mobile number (optional)	No.
			Country code:	For mumb on (and in all)	
			Country code.	Fax number (optional):	30000
			Email address (	optional):	
What Ara	You Applying For?				
. Wilat Are	Tou Applying For?			ervation Order Details	
re you wishing	to carry out works to tree(s)	. 19	Do you know th Tree Preservation		☐ Yes ☐ No
a Conservation	n Area (CA)?	No No	If Yes, please pro	ovide the title of the TPO:	
e you seeking	consent for works to tree(s)				rest of the
bject to a Tree	Preservation Order (TPO)? Yes	No No	J. Papilineszánia a e-		
Identificat	ion Of Trace(e) And Description	- 0())(			
ease identify t	ion Of Tree(s) And Description the tree(s) and provide a full and clear plan showing position(s) of the tree(s)	n Of Works	the works you		
CHANGE OF CHICKOIL	promotional postubilist of the free	SHID PARADON TO P	alliminae namadi	roade and houndaries	
cample T3 Oak	protected by a TPO, if possible pleas two Beech and one Birch in G2; seve	e number them n Ash in A1:svc	as shown in the	First Schedule to the Tree F	reservation Order (fo
ees and propo	sed works:		•		
TI.	EUCALYPTUS:	REDULE	LARCE	Fin Dunas	10
1 1.	11103	0	A	TELL OGENIAM	VINU
STRA	THORD VILLAS 134	SM	iAnd Out	Mour L Sni	AU BRANG
Orev	TFORD VILLAS BY	To	ALLOU M	DAE LIGHT IN	TO GALDENS
ou might find it	helpful to consult a tree surgeon to	clarify what nee	ds to be done.		
ase state the r	eference number you have given the	nlan.			
	Joseph Journal Green the	Pici.			

8. Trees-Reasons For Works	
This section only needs to be completed if you are seeking of	consent to trees under a Tree Preservation Order (TPO)
Please state the reasons for carrying out the proposed work	
	MAR GALDEN
	E 19 STRAT FORD VILLAS
10	The street of city
REAL GARDON STI	
	- 18 ROCHESTEN SQUAME
as the same as a series of the same to	
Please indicate whether the reasons for carrying out the pro accompanied by the documents specified.	posed works include any of the following. If so, your application must be
Health or safety of the tree(s) - e.g. it is diseased, fears that it	
If Yes, information required - report by a tree professional (e	
advisar).	- San
Alleged subsidence damage:	Yes No
ground and building movement through a distortion surve	surveyor, together with one from a tree professional - to include date and age potential; location of any roots found and their identification; history o
the treating and itematicgement since discovery or the dama	ey and/or level or crack monitoring over suitable period; other vegetation in age.
the vicinity and its management since discovery of the dama D. Trees-Additional Information	ey and/or level or crack monitoring over suitable period; other vegetation in age.
the treating and itematicgement since discovery or the dama	age.
Trees - Additional Information  Are you providing additional information in support of your	application? Yes No
Trees - Additional Information  Are you providing additional information in support of your	age.
Trees - Additional Information  Are you providing additional information in support of your	application? Yes No
Trees - Additional Information  Are you providing additional information in support of your	application? Yes No
Trees - Additional Information  Are you providing additional information in support of your	application? Yes No
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Trees - Additional Information  Are you providing additional information in support of your  f Yes, please provide the reference numbers of plans, docum	application? Yes No ments, professional reports etc in support of your application:
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Prees - Additional Information  Are you providing additional information in support of your of Yes, please provide the reference numbers of plans, document of the control	application? Yes No ments, professional reports etc in support of your application:

10. Application For Tree Works- Checklist	
Mease use this checklist to ensure that the form has been completed	correctly and that all relevant information is submitted.
For works to trees protected by a Tree Preservation Order, failure to a application being rejected or delay in dealing with it. In particular, you	
3 copies of a completed and dated application form.	
3 copies of a sketch plan showing the location of all tree(s).	The second second second
3 copies of a full and clear specification of the works to be carried out	1813
3 copies of a statement of reasons for the proposed work.	The state of the s
3 - 11.0 - 1.00(0).	t or horticultural adviser) if your reasons relate to the health and/or
3 copies of a report by an engineer or surveyor, together wit subsidence damage.	h one 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 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, pl following types of additional information you are submitting (3 copie	logo indicate which of the
- photographs.	sol each need to be provided):
-report by a tree professional (arboriculturist) or other.	
- details of any assistance or advice sought from a Local Planning Auth	Pority officer prior to submitting this form
11. Declaration - Trees	ising emed phot to submitting this form.
I/we hereby apply for consent/give notice as described in this form an	d the accompanying plans and additional information
Signed - Applicant:	Or signed - Agent:
Date (DD/MM/YYYY):	
(date cannot be pre-application)	
12. Applicant Contact Details	13. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number:	Country code: National number: Extension number:
	number.
Country code: Mobile number (optional):	Country code: Mobile number (optional):
Country code: Fax number (optional):	
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Empil address (s. Alice al)
Email address (optional):	Email address (optional):