

Estate Management Consent Form

a) Applicant (Owner or Lessee) Name: <input type="text" value="Heather Kenny"/> Is the applicant a Councillor, member of staff or related to either? <input type="checkbox"/> Yes <input type="checkbox"/> No Address: <input type="text" value="18 Rooks Hill, Welwyn Garden City, AL8 6ET"/> Postcode: <input type="text" value="AL8 6ET"/> Telephone no: <input type="text"/> Mobile no: <input type="text"/> Email: <input type="text"/>	b) Agent (if any) Name: <input type="text" value="Evoke Tree Services Ltd"/> Address: <input type="text" value="15 Great Ganett, Welwyn Garden City, AL7 3DA"/> Postcode: <input type="text"/> Telephone no: <input type="text"/> Mobile no: <input type="text"/> Email: <input type="text"/>
c) Site Address: <input type="text" value="18 Rooks Hill, Welwyn Garden City, AL8 6ET"/>	
d) Description of Proposal <input type="text" value="Lawson Cypress to fell to ground level. Client has removed shed and exposed the trees at the back which are not in a good condition. She wishes to replant with something more native somewhere else in the garden."/>	
e) Have the works already been carried out or started? <input type="text" value="NO"/>	
f) Has assistance or prior advice been sought from the Council regarding this application? <input type="text" value="NO"/>	
Officer <input type="text"/>	
Date <input type="text" value="N/A"/>	
g) The site is: <input type="text" value="Freehold"/>	
If Leasehold enter the date of the Lease: <input type="text" value="N/A"/>	
Submitted <input type="text" value="20/5/2021 12:15:19"/>	

date: