Estate Management Consent Form

a) Applicant (Owner or Lessee)			b) Agent	(if any)	
Name: Is the applic Councillor, no staff or relate either? Address:	nember of	Murray Thompson Yes No Thompson Thompson Yes No Thompson Yes No Thompson Thompson Yes No Thompson Thompson Yes No Thompson Thompson	Name: Address: Postcode: Telephone no: Mobile no: Email	Evoke Tree Services Ltd 15 Great Ganett, Welwyn Garden City, AL7 3DA	
Postcode:		AL8 6EB			
Telephone n Mobile no: Email	0:				
c) Site Address: 57 Longcroft Lane, Welwyn Garden City, AL8 6EB					
d) Description of Proposal	Description specialist rigging techniques to lower branches to the ground in a safe and				
e) Have the	works alrea	ady been carried out	or started?		
	NO				
f) Has assis application?		or advice been soug	ht from the C	Council regarding this	
Officer	NO				
Officer					
Date	N/A				
g) The site is:					
If	N/A				

Leasehold enter the date of the Lease:	
Submitted date:	23/8/2022 01:18:12