

## Estate Management Consent Form

<b>a) Applicant (Owner or Lessee)</b>  Name: <input type="text" value="Jenny Gostick"/> 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="20 Walden Road, Welwyn Garden City, AL8 7PF"/>  Postcode: <input type="text" value="AL8 7PF"/> Telephone no: <input type="text"/> Mobile no: <input type="text"/> Email: <input type="text"/>	<b>b) Agent (if any)</b>  Name: <input type="text"/> Address: <input type="text"/> Postcode: <input type="text"/> Telephone no: <input type="text"/> Mobile no: <input type="text"/> Email: <input type="text"/>
<b>c) Site Address:</b> <input type="text" value="20 Walden Road, Welwyn Garden City, AL8 7PF"/>	
<b>d) Description of Proposal</b> <input type="text" value="30% crown reduction in 2 large trees in rear garden"/>	
<b>e) Have the works already been carried out or started?</b> <input type="text" value="NO"/>	
<b>f) Has assistance or prior advice been sought from the Council regarding this application?</b> <input type="text" value="NO"/>	
Officer: <input type="text"/>	
Date: <input type="text" value="N/A"/>	
<b>g) The site is:</b> <input type="text" value="Leasehold"/>	
If Leasehold enter the date of the Lease: <input type="text" value="N/A"/>	
Submitted date: <input type="text" value="30/8/2022 11:16:31"/>	