

Estate Management Consent Form

a) Applicant (Owner or Lessee) Name: <input type="text" value="Subsidence Management Services"/> 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="Gateway House
4 Penman Way
Grove Park
Leicester
LE19 1SY"/> Postcode: <input type="text" value="LE19 1SY"/> Telephone no: <input type="text"/> Mobile no: <input type="text"/> Email: <input type="text"/>	b) Agent (if any) Name: <input type="text" value="Mr Simon Greener"/> Address: <input type="text" value="Environmental Services
Unit 4, Linnet Court
Cawledge Business Park
Alnwick
NE66 2GD"/> 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="6 Densley Close, Welwyn Garden City, AL8 7JX"/>	
d) Description of Proposal	<input type="text" value="Oak (T1) - Fell
The tree works are proposed to stop the influence of the tree(s) on the soil below building foundation level and provide long term stability"/>
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	<input type="text" value="N/A"/>

Lease:

Submitted date:

19/6/2020 05:21:06