Estate Management Consent Form

a) Applicant (Owner or Lessee)		b) Agent (if any)
Name: Is the applicant a Councillor, member of staff or related to either? Address:	Austin Mitchell Yes No 34 Sherrardspark Road, Welwyn Garden City, AL8 7JS	Name: Address: Postcode: Telephone no: Mobile no: Email
Postcode: Telephone no: Mobile no: Email	AL8 7JS	
c) Site Address: Site Address		
e) Have the works already been carried out or started?		
f) Has assistance or prior advice been sought from the Council regarding this application?		
Officer		
Date N/A		

g) The site is:	Leasehold
If Leasehold	N/A
enter the date of the Lease:	
Submitted date:	07/7/2020 09:18:24