

Viewmount Arduthie Road Stonehaven AB39 2DQ Tel: 01467 534333 Email: planningonline@aberdeenshire.gov.uk

Applications cannot be validated until all the necessary documentation has been submitted and the required fee has been paid.

Thank you for completing this application form:

ONLINE REFERENCE 100453397-001

The online reference is the unique reference for your online form only. The Planning Authority will allocate an Application Number when your form is validated. Please quote this reference if you need to contact the planning Authority about this application.

Applicant or Agent Details

Are you an applicant or an agent? * (An agent is an architect, consultant or someone else acting on behalf of the applicant in connection with this application) T Applicant \leq Agent

Applicant Details

Please enter Applicant de	etails		
Title:	Mr	You must enter a Bui	lding Name or Number, or both: *
Other Title:		Building Name:	The School House
First Name: *	Jim	Building Number:	
Last Name: *	Titmuss	Address 1 (Street): *	Auchenblae
Company/Organisation		Address 2:	
Telephone Number: *		Town/City: *	Auchenblae
Extension Number:		Country: *	Aberdeenshire
Mobile Number:		Postcode: *	AB301WQ
Fax Number:]	
Email Address: *			

Site Address Details				
Planning Authority:	Aberdeenshire Council			
Full postal address of the s	tite (including postcode where availab	le):	_	
Address 1:	SCHOOLHOUSE			
Address 2:	AUCHENBLAE			
Address 3:				
Address 4:				
Address 5:				
Town/City/Settlement:	LAURENCEKIRK			
Post Code:	AB30 1WQ			
Please identify/describe the location of the site or sites				
Northing 7	78505	Easting	372525	
Ownership of	Trees			
Is the applicant the owner	of the tree(s)? *		T Yes \leq No	
Details of Tree	Protection			
Under what procedures/de	signations are these tree(s) protected	? *		
≤ Tree Preservation Order				
T Conservation Area				
≤ Condition on Planning Permission				
Please provide any relevant details about the Tree Preservation Order or other protection (e.g. Title and date of the Tree Preservation Order, if known). * (Max 500 characters)				
Please provide the application reference no. given to you by your planning authority for your previous application: *				

Identification of Tree(s) and Works Proposed

Please indicate the tree(s) and provide a full detailed specification of the works you want to carry out.

Give details of the species of the tree(s) and include an accurate plan showing positions(s) of the tree(s) in relation to buildings, named roads and boundaries. A group of trees can be treated as one. If the trees are protected by a TPO, please try to number them as shown in the First Schedule to the Tree Preservation Order (for example T3 Oak; two Beech and one Birch in G2; seven Ash in A1; sycamore in W1). You may submit a schedule of works.

Tree description: *	Carry out work identified as 'Group 4' in attached reports	
Works description: *	Carry out work identified as 'Group 4' in attached reports	

Note: if you are submitting a schedule of works or a plan, please give the reference number in the description of the works.

Reason for Proposed Tree Works

Please state the reason why you wish to carry out the proposed works to tree(s). In particular, please indicate whether the reasons for carrying out the proposed works include any of the following. If so, your application must be accompanied by the documents specified. *

 \leq Health or safety of the tree(s) – e.g. it is diseased, fears that it might break or fall.

 \leq Alleged subsidence damage.

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If you have selected Health or safety of the tree(s), or Other you should provide a report by a tree professional (e.g. arboriculturist, horticultural adviser).

If you have selected Alleged subsidence damage please provide a report by an engineer or surveyor, together with one from a tree professional – to include date and description of property damage; sub-soil type and shrinkage potential; location of any roots found and their identification; history of ground and building movement through a distortion survey and/or level or crack monitoring over a period of at least 12 months; other vegetation in the vicinity and its management since discovery of the damage.

If Other, please provide further details: * (Max 500 characters)

As discussed in attached reports.

Tree Works – Additional Information

Are you proposing to plant replacement tree(s) in support of your application? *

 \leq Yes T No

If Yes, please explain your replanting proposals on plans or other supporting information.

Checklist – Application for tree works

Please complete the following checklist to make sure you have provided all the necessary information in support of your application. Failure to submit all this information may result in your application being deemed invalid. The planning authority cannot start processing your application until it is valid.

Plan showing accurately the location of all tree(s). *	T Yes \leq No
A full and clear specification of the works to be carried out. *	T Yes \leq No
A plan showing location of replacement trees. *	\leq Yes T No
The necessary reports as requested by your planning authority to support the reasons for the works you Intend to carry out. *	T Yes \leq No
Photographs. *	\leq Yes T No
No fee is needed with an application for Tree Works.	

Declare – Tree(s) I/we apply for permission to carry out works to trees as described in this form and the accompanying plans/drawings and additional information. Declaration Name: Mr Jim Titmuss Declaration Date: 06/08/2021