

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 100461712-001

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)

Agent Details

Please enter Agent details	3				
Company/Organisation:	Future Forestry				
Ref. Number:		You must enter a Building Name or Number, or both: *			
First Name: *	Angela	Building Name:	Tullochmuir		
Last Name: *	Smith	Building Number:			
Telephone Number: *	01330833833	Address 1 (Street): *	Lynturk		
Extension Number:		Address 2:			
Mobile Number:		Town/City: *	Tough		
Fax Number:		Country: *	Aberdeenshire		
		Postcode: *	AB33 8HU		
Email Address: *	info@futureforestry.co.uk				
Is the applicant an individual or an organisation/corporate entity? *					
Individual X Organisation/Corporate entity					

Applicant Agent

Applicant Details							
Please enter Applicant details							
Title:	Mrs	You must enter a Bi	uilding Name or Number, or both: *				
Other Title:		Building Name:	Tullochmuir				
First Name: *	Angela	Building Number:					
Last Name: *	Smith	Address 1 (Street): *	Castleknowe Of Lynturk				
Company/Organisation	Future Forestry Ltd	Address 2:					
Telephone Number: *	01330 833833	Town/City: *	Tough				
Extension Number:		Country: *	United Kingdom				
Mobile Number:		Postcode: *	AB33 8HU				
Fax Number:							
Email Address: *	info@futureforestry.co.uk						
Site Address	Details						
Planning Authority:	Aberdeenshire Council						
Full postal address of the site (including postcode where available):							
Address 1:	RONNECHT HOUSE						
Address 2:	MOUNT STREET						
Address 3:							
Address 4:							
Address 5:							
Town/City/Settlement:	BANCHORY						
Post Code:	AB31 5SL						
Please identify/describe the location of the site or sites							
Northing	796117	Easting	369386				

Ownership of Trees

Is the applicant the owner of the tree(s)? *

Has the owner been notified? *

What is your or the applicant's interest in the site where the tree(s) are located? * (Max 500 characters)

We are acting on behalf of a client. The trees are on his property at Ronnecht House, Mount St, Banchory, AB31 5SL and they require some work done.

Details of Tree Protection

Under what procedures/designations are these tree(s) protected? *

X Tree Preservation Order

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)

Trees are covered under TPO number 72, which is in force on the property.

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: *	Group 1 TPO - 4 x Birch		
Works description: *	On Work Schedule TW2522		
Tree description: *	T10 Under TPO - 1 x Birch		
Works description: *	On Work Schedule TW2522		
Note: if you are submitting a schedule of works or a plan, please give the reference number in the description of the works.			

Yes X No

X Yes No

Reason for Pro	posed 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. *				
Health or safety of the t	ree(s) – e.g. it is diseased, fears that it might break or fall.			
Alleged subsidence dar	nage.			
Other (please specify).				
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.				
Tree Works – A	dditional Information			
Are you proposing to plant re	eplacement tree(s) in support of your application? *	Yes X No		
If Yes, please explain your re	eplanting proposals on plans or other supporting information.			
Checklist – App	olication 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). *	X Yes No		
A full and clear specification	of the works to be carried out. *	X Yes No		
A plan showing location of re	eplacement trees. *	Yes X No		
The necessary reports as re- Intend to carry out. *	quested by your planning authority to support the reasons for the works you	🗙 Yes 🗌 No		
Photographs. *		X Yes 🗌 No		
No fee is needed with an ap	plication 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:	Mrs Angela Smith			
Declaration Date:	27/08/2021			