Inverclyde							
Municipal Buildings Clyde Square Greenock PA15 1LY Tel: 01475 717171 Fax: 01475 712 468 Email: devcont.planning@inverclyde.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 100649989-001							
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							
	n agent? * (An agent is an architect, consult	ant or someone else ac					
on behalf of the applicant in connection with this application) Image: Applicant Image: Applican							
Applicant Det							
Please enter Applicant de							
Title:	Mr	You must enter a Bu	ilding Name or Number, or both: *				
Other Title:		Building Name:	Vehicle Maintenance Facility				
First Name: *	Tom	Building Number:	8				
Last Name: *	Hughes	Address 1 (Street): *	Pottery Street				
Company/Organisation		Address 2:					
Telephone Number: *	01475714781	Town/City: *	Greenock				
Extension Number:		Country: *	Inverclyde				
Mobile Number:		Postcode: *					
Fax Number:							
Email Address: * tom.hughes@inverclyde.gov.uk							

Site Address Details							
Planning Authority:	Inverclyde Council						
Full postal address of the	site (including postcode where availab	ble):	_				
Address 1:	53 BRISBANE STREET	53 BRISBANE STREET					
Address 2:							
Address 3:							
Address 4:							
Address 5:							
Town/City/Settlement:	GREENOCK						
Post Code:	PA16 8NS						
Please identify/describe t	he location of the site or sites						
Northing	676758	Easting	226936				
Ownership of Trees							
Is the applicant the owner of the tree(s)? *							
Details of Tree Protection							
Under what procedures/designations are these tree(s) protected? *							
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)							
Disease ways date of	ation reference no. given to you by you						

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: *	Tree Works Inverclyde				
Works description: *	Tree Works as set out in a recent survey				
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. *

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

Alleged subsidence damage.

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 – Additional Information

Are	vou	pro	posinc	to I	plant re	placement	tree(s)	in su	pport of	your	application? *	

\mathbf{X}	Yes	\square	No
• •	162		INC

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). *	🗙 Yes 🗌 No
A full and clear specification of the works to be carried out. *	🗙 Yes 🗌 No
A plan showing location of replacement trees. *	🗌 Yes 🛛 No
The necessary reports as requested by your planning authority to support the reasons for the works you Intend to carry out. *	X Yes 🗌 No
Photographs. *	🗌 Yes 🛛 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 Tom Hughes Declaration Date: 30/10/2023