

Business Centre G.2 Waverley Court 4 East Market Street Edinburgh EH8 8BG Email: planning.support@edinburgh.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

100652497-001

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) Applicant Applicant						
Agent Details						
Please enter Agent details	3					
Company/Organisation:	PDP Associates					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Piers	Building Name:	The Willows			
Last Name: *	Palmer	Building Number:				
Telephone Number: *	01768354130	Address 1 (Street): *	The Willows			
Extension Number:		Address 2:	Great Asby			
Mobile Number:	07776 147843	Town/City: *	Appleby in Westmorland			
Fax Number:		Country: *	United Kingdom			
		Postcode: *	CA16 6HD			
Email Address: *	piers@pdpcumbria.co.uk					
Is the applicant an individual or an organisation/corporate entity? * Individual Organisation/Corporate entity						

Applicant Details						
Please enter Applicant details						
Title:	Mr	You must enter a Bu	uilding Name or Number, or both: *			
Other Title:		Building Name:				
First Name: *	Derek	Building Number:	13			
Last Name: *	Mitchel	Address 1 (Street): *	Pewlands Avenue			
Company/Organisation	N/A	Address 2:				
Telephone Number: *		Town/City: *	Edinburgh			
Extension Number:		Country: *	UK			
Mobile Number:		Postcode: *	EH10 5JY			
Fax Number:						
Email Address: *						
Site Address	Details					
Planning Authority:	City of Edinburgh Council					
Full postal address of th	ne site (including postcode where available	e):				
Address 1:	13 PLEWLANDS AVENUE					
Address 2:	MORNINGSIDE					
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	EDINBURGH					
Post Code:	EH10 5JY					
Please identify/describe the location of the site or sites						
Northing	670706	Easting	323908			

Ownership of Trees					
Is the applicant the owner of the tree(s)? *		⊠ Yes □ No			
Details of Tree Protection					
Under what procedures/designations are these tree(s) protected? *					
☐ Tree Preservation Orde	er -				
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 applicati authority for your previous a	on reference no. given to you by your planning 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: *	Silver Birch, located adjacent to front gate and Pewlands Avenue pavement.				
Works description: *	Fell and replace with new Silver Blrch.				
Note: if you are submitting a	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.					

If Other, please provide fur	ther details: * (Max 500 characters)			
It has decay in the bough pavement causing a trip h	following previous surgery works which have allowed water ingress. The roots an nazard.	e lifting the adjacent		
Tree Works - A	Additional Information			
Are you proposing to plant	replacement tree(s) in support of your application? *	X Yes ☐ No		
If Yes, please explain your	replanting proposals on plans or other supporting information.			
Checklist - Ap	plication 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	e location of all tree(s). *	X Yes No		
A full and clear specification	n of the works to be carried out. *	X Yes No		
A plan showing location of	🛛 Yes 🗌 No			
The necessary reports as r Intend to carry out. *	equested by your planning authority to support the reasons for the works you	🛛 Yes 🗌 No		
Photographs. *		🛛 Yes 🗌 No		
No fee is needed with an a	pplication for Tree Works.			
Declare - Tree	(s)			
I/we apply for permission to information.	o carry out works to trees as described in this form and the accompanying plans/d	rawings and additional		
Declaration Name:	Mr PDP Associates			
Declaration Date:	29/11/2023			