

2 Spiersbridge Way Thornliebank G46 8NG Tel: 0141 577 3001 Email: planning@eastrenfrewshire.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 100652146-001

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) \leq Applicant T Agent

Agent Details

Please enter Agent details						
Company/Organisation:	GTS Tree Surgery Ltd					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Tom	Building Name:				
Last Name: *	Periton	Building Number:	1			
Telephone Number: *	07789811469	Address 1 (Street): *	5 Queensborough Gardens			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Glasgow			
Fax Number:		Country: *	UK			
		Postcode: *	G12 9PW			
Email Address: *	tom@theglasgowtreesurgeon.co.uk					
Is the applicant an individual or an organisation/corporate entity? *						
\leq Individual T Organisation/Corporate entity						

Applicant Det	ails					
Please enter Applicant de	etails					
Title:	Mr	You must enter a B	You must enter a Building Name or Number, or both: *			
Other Title:		Building Name:				
First Name: *	Tom	Building Number:	5			
Last Name: *	Periton	Address 1 (Street): *	Queensborough Gardens			
Company/Organisation	GTS Tre Surgery Ltd	Address 2:				
Telephone Number: *		Town/City: *	Glasgow			
Extension Number:		Country: *	UK			
Mobile Number:		Postcode: *	G12 9PW			
Fax Number:						
Email Address: *						
Site Address Details						
Planning Authority:	East Renfrewshire Council					
Full postal address of the	site (including postcode where available	e):				
Address 1:	1A HUMBIE COURT					
Address 2:	NEWTON MEARNS					
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	GLASGOW					
Post Code:	G77 5PQ					
Please identify/describe t	he location of the site or sites					

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)

I own GTS Tree Surgery Ltd, the joint owners at Humbie Court G77 5PQ has asked me to submit this application on their behalf for the proposed tree works.

Details of Tree Protection

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

- \leq Tree Preservation Order
- Т **Conservation Area**
- \leq 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: *	Sycamore tree			
Works description: *	Crown lift and pruning of branches that are overhanging into a neighbour's property.			
Tree description: *	Hornbeam tree in car park			
Works description: *	Crown reduction 25%			
Tree description: *	2 leylandii trees behind garages			
Works description: *	Remove as too close to the garages			
Note: if you are submitting a schedule of works or a plan, please give the reference number in the description of the works.				

 \leq Yes T No

T Yes \leq No

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. *

- T Health or safety of the tree(s) e.g. it is diseased, fears that it might break or fall.
- \leq Alleged subsidence damage.
- \leq 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 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 Tom Periton Declaration Date: 21/11/2023