• EDINBURGH COUNCIL						
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	100652855-001					
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 in connection with this application)	ant or someone else a	Applicant 🛛 Agent			
Agent Details						
Please enter Agent details	S					
Company/Organisation:	Blaikie Tree Services					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	David	Building Name:				
Last Name: *	Blaikie	Building Number:	7			
Telephone Number: *	07554014524	Address 1 (Street): *	Unit 7 Turnhouse Court			
Extension Number:		Address 2:	Brownrigg Yards			
Mobile Number:		Town/City: *	Newbridge			
Fax Number:		Country: *	Scotland			
		Postcode: *	EH28 8TQ			
Email Address: *	blaikietreeservices@gmail.com					
Is the applicant an individual or an organisation/corporate entity? *						
Individual Organisation/Corporate entity						

Please enter Applicant de					
Title:	Mr	You must enter a Bu	uilding Name or Number, or both: *		
Other Title:		Building Name:			
First Name: *	Kevan	Building Number:	14		
Last Name: *	McDonald	Address 1 (Street): *	Circus Lane		
Company/Organisation		Address 2:			
Telephone Number: *		Town/City: *	Edinburgh		
Extension Number:		Country: *	Scotland		
Mobile Number:		Postcode: *	EH3 6SU		
Fax Number:					
Email Address: *					
Site Address Details					
Planning Authority:	City of Edinburgh Council				
Full postal address of the	e site (including postcode where avai	lable):			
Full postal address of the Address 1:	e site (including postcode where avai	lable):			
Address 1:		lable):			
Address 1:	14 CIRCUS LANE	lable):			
Address 1: Address 2: Address 3:	14 CIRCUS LANE	lable):			
Address 1: Address 2: Address 3:	14 CIRCUS LANE	lable):			
Address 1: Address 2: Address 3: Address 4:	14 CIRCUS LANE	lable):			
Address 1: Address 2: Address 3: Address 4: Address 5:	14 CIRCUS LANE STOCKBRIDGE	lable):			
Address 1: Address 2: Address 3: Address 4: Address 5: Town/City/Settlement: Post Code:	14 CIRCUS LANE STOCKBRIDGE EDINBURGH	lable):			
Address 1: Address 2: Address 3: Address 4: Address 5: Town/City/Settlement: Post Code:	14 CIRCUS LANE STOCKBRIDGE EDINBURGH EH3 6SU	lable):			
Address 1: Address 2: Address 3: Address 4: Address 5: Town/City/Settlement: Post Code:	14 CIRCUS LANE STOCKBRIDGE EDINBURGH EH3 6SU	lable):			

Ownership of T	rees				
Is the applicant the owner of	f the tree(s)? *	Yes X No			
Has the owner been notified	?*	X Yes No			
What is your or the applican	What is your or the applicant's interest in the site where the tree(s) are located? * (Max 500 characters)				
Trees are located in surro	unding properties around garden (14 Circus Lane) and owners are	e in agreement of safety works			
Details of Tree Protection					
Under what procedures/designations are these tree(s) protected? *					
Tree Preservation Order					
Conservation Area					
Condition on Planning F	Condition on Planning Permission				
Please provide any relevant Preservation Order, if knowr	details about the Tree Preservation Order or other protection (e.g n). * (Max 500 characters)	. Title and date of the Tree			
	on reference no. given to you by your planning				
authority for your previous a	pplication: *				
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: *	Two Ash trees and one Lime tree				
Works description: *	Safety works to be undertaken on 3 trees surrounding garden o	f 14 Circus Lane.			

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

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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	tree(s) – e.g. it is diseased, fears that it might break or fall.					
Alleged subsidence dat	mage.					
Other (please specify).						
If you have selected Health horticultural adviser).	or safety of the tree(s), or Other you should provide a report by a tree professiona	al (e.g. arboriculturist,				
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 furth	her details: * (Max 500 characters)					
Safety works to be undertaken on 3 trees surrounding garden of 14 Circus Lane. Including target pruning, deadwood removal and crown reduction works. The two Ash trees have mid stage dieback and safety maintenance including deadwood removal and target pruning of weak limbs for management and reinspect Dieback progression over next 12-24 months. Also the Large Lime requires partial crown reduction at 2m to improve shape, also vast amounts of deadwood within the tree requires removal due to safetv.						
Tree Works – A	Additional Information					
Are you proposing to plant r	replacement tree(s) in support of your application? *	🗌 Yes 🔀 No				
If Yes, please explain your r	replanting proposals on plans or other supporting information.					
Checklist – Ap	plication for tree works					
	ng checklist to make sure you have provided all the necessary information in sup ormation may result in your application being deemed invalid. The planning autho lid.					
Plan showing accurately the	e location of all tree(s). *	🗙 Yes 🗌 No				
A full and clear specification	n of the works to be carried out. *	🗙 Yes 🗌 No				
A plan showing location of r	eplacement trees. *	🗌 Yes 🔀 No				
The necessary reports as re Intend to carry out. *	equested by your planning authority to support the reasons for the works you	X Yes 🗌 No				
Photographs. *		🗙 Yes 🗌 No				
No fee is needed with an ap	oplication for Tree Works.					
Declare – Tree((S)					
I/we apply for permission to information.	carry out works to trees as described in this form and the accompanying plans/dr	rawings and additional				
Declaration Name:	Mr David Blaikie					
Declaration Date:	23/11/2023					