

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

100653939-001

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.

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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						
Company/Organisation:	Castle Trees					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Ryan	Building Name:				
Last Name: *	Evans	Building Number:	26			
Telephone Number: *	07590012448	Address 1 (Street): *	Pincott Drive			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Edinburgh			
Fax Number:		Country: *	United Kingdom			
		Postcode: *	EH17 8ZQ			
Email Address: *	castletrees82@gmail.com					
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	ilding Name or Number, or both: *			
Other Title:		Building Name:				
First Name: *	Ryan	Building Number:	26			
Last Name: *	Evans	Address 1 (Street): *	Pincott Drive			
Company/Organisation	Castle Trees	Address 2:				
Telephone Number: *		Town/City: *	Edinburgh			
Extension Number:		Country: *	Scotland			
Mobile Number:		Postcode: *	EH17 8ZQ			
Fax Number:						
Email Address: *						
Site Address I	Details					
Planning Authority:	City of Edinburgh Council					
Full postal address of the	site (including postcode where available):				
Address 1:	13 ATHOLL TERRACE					
Address 2:	DALRY					
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	EDINBURGH					
Post Code:	EH11 2BP					
Please identify/describe the location of the site or sites						
Northing	573046	Easting	324134			

Ownership of T	rees			
Is the applicant the owner of	f the tree(s)? *	☐ Yes ☒ No		
Has the owner been notified	!? *	X Yes □ No		
What is your or the applican	t's interest in the site where the tree(s) are located? * (Max 500 ch	naracters)		
Applying on behalf of the	Applying on behalf of the owner.			
Details of Tree	Protection			
Under what procedures/des	ignations are these tree(s) protected? *			
☐ Tree Preservation Orde	er			
X Conservation Area				
Condition on Planning I	Permission			
Please provide any relevant Preservation Order, if known	details about the Tree Preservation Order or other protection (e.g.n). * (Max 500 characters)	. Title and date of the Tree		
Please provide the application	on reference no. given to you by your planning			
authority for your previous a				
Identification o	f Tree(s) and Works Proposed			
Please indicate the tree(s) and provide a full detailed specification of the works you want to carry out.				
roads and boundaries. A gro	of the tree(s) and include an accurate plan showing positions(s) of pup of trees can be treated as one. If the trees are protected by a Tree Preservation Order (for example T3 Oak; two Beech and one chedule of works.	TPO, please try to number them as shown		
Tree description: *	Eucalyptus			
Works description: *	Crown thin of approx 20% and a maximum 2.5 m reduction			
Note: if you are submitting a	te: 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 dam	age.					
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 further	er details: * (Max 500 characters)					
General tree maintenance.						
Tree Works - A	dditional Information					
Are you proposing to plant re	placement tree(s) in support of your application? *	☐ Yes ☒ No				
If Yes, please explain your re	planting proposals on plans or other supporting information.					
Checklist – App	lication for tree works					
	g checklist to make sure you have provided all the necessary information in supp mation may result in your application being deemed invalid. The planning author d.					
Plan showing accurately the I	ocation of all tree(s). *	🛛 Yes 🗌 No				
A full and clear specification of	of the works to be carried out. *	X Yes No				
A plan showing location of rep	placement trees. *	Yes No				
The necessary reports as req Intend to carry out. *	uested by your planning authority to support the reasons for the works you	X Yes No				
Photographs. *		🛛 Yes 🗌 No				
No fee is needed with an app	lication for Tree Works.					
Declare - Tree(s	s)					
I/we apply for permission to c information.	arry out works to trees as described in this form and the accompanying plans/dra	awings and additional				
Declaration Name:	Mr Ryan Evans					
Declaration Date:	04/12/2023					