• 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	100660669-002						
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 A	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 Det	ails						
Please enter Applicant de	etails						
Title:	Mr	You must enter a Building Name or Number, or both: *					
Other Title:		Building Name:					
First Name: *	Greg	Building Number:	23				
Last Name: *	Hardie	Address 1 (Street): *	23 Pikes Pool Drive, Kirkliston				
Company/Organisation	Hardie	Address 2:					
Telephone Number: *		Town/City: *	kirkliston				
Extension Number:		Country: *	United Kingdom				
Mobile Number:		Postcode: *	eh299gh				
Fax Number:							
Email Address: *							

Site Address Details					
Planning Authority:	City of Edinburgh Council				
Full postal address of the s	ite (including postcode where availabl	e):			
Address 1:	18 MORTONHALL ROAD				
Address 2:	GRANGE				
Address 3:					
Address 4:					
Address 5:					
Town/City/Settlement:	EDINBURGH				
Post Code:	EH9 2HW				
Please identify/describe the location of the site or sites					
Northing 6	71170	Easting	325608		
Ownership of	Trees				
Is the applicant the owner o	of the tree(s)? *			Yes X No	
Has the owner been notifie	d? *			X Yes No	
What is your or the applica	nt's interest in the site where the tree(	s) are located? * (Max 500 cł	naracters)		
Applying on behalf of ow	ners				
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 Preservation Order, if knowr	t details about the Tree Preservation Order or other protection ( n). * (Max 500 characters)	e.g. Title and date of the Tree			
Please provide the application reference no. given to you by your planning authority for your previous application: *					
Identification o	f Tree(s) and Works Proposed				
Please indicate the tree(s) a	and provide a full detailed specification of the works you want to	o 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: *	Copper Beech				
Works description: *	Remove tree and cut stump low				
Note: if you are submitting a	L a schedule of works or a plan, please give the reference numbe	r in the description of the works.			
Reason for Pro	posed Tree Works				
Please state the reason why	you wish to carry out the proposed works to tree(s). In particued works include any of the following. If so, your application must be works include any of the following. If so, your application must be works include any of the following.				
Health or safety of the t	tree(s) – e.g. it is diseased, fears that it might break or fall.				
Alleged subsidence dar	mage.				
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 furth	her details: * (Max 500 characters)				
The tree has an included union between co-dominant stems and has been pruned excessively on the East crown leaving an asymmetrical crown bias. The tree is in close proximity to the house and is overbearing and blocking light					
Tree Works – A	Additional Information				
Are you proposing to plant r	eplacement tree(s) in support of your application? *	X Yes 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 I	ocation of all tree(s). *	X 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. $^{\star}$		X Yes 🗌 No			
Photographs. *		X 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 Greg Hardie				
Declaration Date:	11/02/2024				