

Municipal Buildings Clyde Square Greenock PA15 1LY Tel: 01475 717171 Fax: 01475 712 468 Email: devcont.planning@inverclyde.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 100661498-001

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)

T Applicant  $\leq$  Agent

| on behalf of the applicant in connection with this application) |                | 1 Applicant = Agent                                  |                |  |
|---|----------------|--|----------------|--|
| Applicant Det   | ails           |  |                |  |
| Please enter Applicant de                                       | etails         | _  |                |  |
| Title:  | Mrs            | You must enter a Building Name or Number, or both: * |                |  |
| Other Title:  |                | Building Name:                                       |                |  |
| First Name: *   | Sharon         | Building Number:                                     | 37A            |  |
| Last Name: *  | McVicar Bowman | Address 1<br>(Street): *                             | Union Street   |  |
| Company/Organisation  |                | Address 2:   |                |  |
| Telephone Number: *   |                | Town/City: *   | Greenock       |  |
| Extension Number:   |                | Country: *   | United Kingdom |  |
| Mobile Number:  |                | Postcode: *  | PA16 8DN       |  |
| Fax Number:   |                |  |                |  |
| Email Address: *  |                |  |                |  |

| Site Address Details   |  |             |        |  |  |  |
|--|--|-------------|--------|--|--|--|
| Planning Authority:  | Inverclyde Council                         |             |        |  |  |  |
| Full postal address of the site (including postcode where available):  |  |             |        |  |  |  |
| Address 1:   | 37A UNION STREET                           |             |        |  |  |  |
| Address 2:   |  |             |        |  |  |  |
| Address 3:   |  |             |        |  |  |  |
| Address 4:   |  |             |        |  |  |  |
| Address 5:   |  |             |        |  |  |  |
| Town/City/Settlement:  | GREENOCK                                   |             |        |  |  |  |
| Post Code:   | PA16 8DN                                   |             |        |  |  |  |
| Please identify/describe the location of the site or sites   |  |             |        |  |  |  |
|  |  |             |        |  |  |  |
|  |  |             |        |  |  |  |
| Northing   | 676891                                     | Easting     | 227085 |  |  |  |
| Ownership of Trees   |  |             |        |  |  |  |
| Ownership of Trees   |  |             |        |  |  |  |
| Is the applicant the owner of the tree(s)? * $T$ Yes $\leq$ No   |  |             |        |  |  |  |
| Details of Tree Protection   |  |             |        |  |  |  |
| Under what procedures/designations are these tree(s) protected? *  |  |             |        |  |  |  |
| ≤ Tree Preservation Order  |  |             |        |  |  |  |
| T 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 app   | lication reference no. given to you by you | ır planning |        |  |  |  |

### 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: \*

Works description: \*

Thin the crown and shorten branches to remove obstruction to allow light into the neighbours garden.

Tree description: \*

Large elm tree (T1)

Thin the crown and shorten branches to remove obstruction to allow light into the neighbours garden.

Tree description: \*

Large laurel tree (T2)

Works description: \*

Thin the crown and shorten branches of overgrown tree to reduce the overhanging into gardens.

Note: 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 damage.
- $T \quad \hbox{Other (please specify)}.$

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 details: \* (Max 500 characters)

In the garden of garden of 37A Union Street, there are two trees that have become vastly overgrown and require substantial pruning. We have been notified by the neighbours as light is blocked from their gardens. I have provided a plan of the garden and the neighbouring gardens. I have included photos to show the current issues with these overgrown trees, such as blocking light into the neighbour's garden and some branches that are so long that they are very close to a neighbour's building.

#### 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). \*  $T \text{ Yes} \leq No$  A full and clear specification of the works to be carried out. \*  $T \text{ Yes} \leq No$  A plan showing location of replacement trees. \*  $\leq Yes T \text{ No}$  The necessary reports as requested by your planning authority to support the reasons for the works you Intend to carry out. \*

Photographs. \*  $T \text{ Yes} \leq No$ 

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: Mrs Sharon McVicar Bowman

Declaration Date: 18/02/2024