

Teith House Kerse Road Stirling FK7 7QA Tel: 01786 233660 Fax: 01786 233186 Email: eplanning@stirling.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 100656051-002

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 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	3				
Company/Organisation:	DBTL LTD				
Ref. Number:		You must enter a Building Name or Number, or both: *			
First Name: *	Aileen	Building Name:	Flat 1/1		
Last Name: *	McGann	Building Number:	27		
Telephone Number: *		Address 1 (Street): *	WEIGHHOUSE CLOSE		
Extension Number:		Address 2:			
Mobile Number:		Town/City: *	PAISLEY		
Fax Number:		Country: *	United Kingdom		
		Postcode: *	PA1 1AG		
Email Address: *					
Is the applicant an individual or an organisation/corporate entity? *					
T Individual \leq Organ	nisation/Corporate entity				

Applicant Details						
Please enter Applicant of	letails					
Title:	Other	You must enter a Bu	You must enter a Building Name or Number, or both: *			
Other Title:	Mr & Mrs	Building Name:	Strathview			
First Name: *	Aileen & Greg	Building Number:	43			
Last Name: *	McGann	Address 1 (Street): *	Main Street			
Company/Organisation		Address 2:				
Telephone Number: *		Town/City: *	Fintry, Glasgow			
Extension Number:		Country: *	United Kingdom			
Mobile Number:		Postcode: *	G63 0XE			
Fax Number:						
Email Address: *						
Site Address	Details					
Planning Authority:	Stirling Council					
Full postal address of th	e site (including postcode where available	e):				
Address 1:	STRATHVIEW					
Address 2:	43 MAIN STREET					
Address 3:	FINTRY					
Address 4:						
Address 5:						
Town/City/Settlement:	GLASGOW					
Post Code:	G63 0XE					
Please identify/describe the location of the site or sites						
Northing	686702	Easting	261599			

Ownership of Trees

Is the applicant the owner of the tree(s)? *

 \leq Yes T No

T Yes \leq No

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)

The applicants have put in a planning application for a proposed new dwelling. As the site is in a conservation area and there are trees on site to be removed or altered as part of the application this application is required too.

Details of Tree Protection

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

- \leq Tree Preservation Order
- T 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: *	T1 - Fraxinus Excelsior
Works description: *	Removal by tree surgeon
Tree description: *	T2 - Tilia x Europea
Works description: *	Re pollard by tree surgeon
Tree description: *	T3 - Prunus Avium
Works description: *	Pruning/ re pollard by tree surgeon
Tree description: *	T4 - Malus Sp.
Works description: *	Tree retained
Tree description: *	T5 - Prunus Domestica
Works description: *	Tree retained
Tree description: *	T6 - Acer Pseudoplatanus
Works description: *	20% crown reduction by tree surgeon
	20% crown reduction by tree surgeon

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. *

T Health or safety of the tree(s) – e.g. it is diseased, fears that it might break or fall.

 \leq Alleged subsidence damage.

T 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)

See enclosed tree survey and also as proposed landscape plan & as proposed site and location plan from the associated planning application ref no: 23/00779/FUL.

Tree Works – Additional Information					
Are you proposing to plant re	placement tree(s) in support of your application? *	\leq Yes T No			
If Yes, please explain your re	planting proposals on plans or other supporting information.				
Checklist – App	lication 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 re	placement trees. *	T Yes \leq No			
The necessary reports as rec Intend to carry out. *	uested by your planning authority to support the reasons for the works you	T Yes \leq No			
Photographs. *		T Yes \leq 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/c	drawings and additional			
Declaration Name:	Mrs Aileen McGann				

Declaration Date: 20/02/2024