



TOWN AND COUNTRY PLANNING (SCOTLAND) ACT 1997

APPLICATION FOR WORKS TO PROTECTED TREES (INCLUDING TREES IN A CONSERVATION AREA)

PLEASE READ THE ATTACHED NOTES FOR GUIDANCE BEFORE COMPLETING THIS FORM

1. Your Details 2. Agent Details (if applicable) Name, Address, Tel. No., E-mail address fields with handwritten entries for Professor J Kubie at 1 Morning Hill, Peebles.

* If you provide an e-mail address, we will undertake all further communication by e-mail, unless otherwise advised; If an agent's details are provided, all correspondence will be undertaken through the agent.

Are you the owner of the trees subject to this application? Yes [] No [] The trees belong jointly to all households in Morning Hill

3. Details of Owner of Trees (if different to applicant) Name, Address, Post Code, Tel. No., E-mail address fields.

4. Location of Trees Provide a postal address where possible. If the location is unclear, or there is not a full postal address, describe it as clearly as possible (e.g. Land to the rear of 12 to 18 High Street or Woodland adjoining North Street). Please see item 4 in the enclosed sheets.

5. What are you applying for? (a) Works to trees protected by a Tree Preservation Order Yes [x] No [] (b) Works to trees in a Conservation Area Yes [] No []

6. Tree Preservation Order Details If you know which Tree Preservation Order protects the trees, enter its number or title below

7. Your application

Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on a separate sheet if necessary

Please see item 7 in the enclosed sheets.

8. Reason for the Work

Please see item 8 in the enclosed sheets.

9. Supporting Documentation and Declaration

I hereby apply for consent and declare that, to the best of my knowledge, the information contained in this application and in the submitted information is correct.

I attach:

- A plan identifying the location of the trees and any other documentation setting out the works applied for
- Copies of photographs/plans and/or sketches to support my application
- Copies of any letters or other correspondence, including any referred to in this application

 APPLICANT NAME Prof J Kubie Date 22 Feb 2024

Please send the completed form to:

Development Standards Division
Regulatory Services Department
Scottish Borders Council
Newtown St. Boswells
TD6 0SA