

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

100662079-001

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.

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) Applicant Applicant						
Agent Details						
Please enter Agent details						
Company/Organisation:						
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Fergus	Building Name:				
Last Name: *	Morrison	Building Number:	4			
Telephone Number: *	07966 548 562	Address 1 (Street): *	barton park avenue			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	edinburgh			
Fax Number:		Country: *	United Kingdom			
		Postcode: *	eh4 6es			
Email Address: *	fergusmorrison_treesurgeon@yahoo.co.u	k				
Is the applicant an individual or an organisation/corporate entity? *						
☑ Individual ☐ Organisation/Corporate entity						

Applicant Details					
Please enter Applicant of	details				
Title:	Mrs	You must enter a Bu	You must enter a Building Name or Number, or both: *		
Other Title:		Building Name:			
First Name: *	christine	Building Number:	6		
Last Name: *	lundie	Address 1 (Street): *	chamberlain road		
Company/Organisation		Address 2:			
Telephone Number: *		Town/City: *	edinburgh		
Extension Number:		Country: *	scotland		
Mobile Number:		Postcode: *	eh10 4dn		
Fax Number:					
Email Address: *					
Site Address	Details				
Planning Authority:	City of Edinburgh Council				
Full postal address of th	e site (including postcode where available)):			
Address 1:	6 CHAMBERLAIN ROAD				
Address 2:	BRUNTSFIELD				
Address 3:					
Address 4:					
Address 5:					
Town/City/Settlement:	EDINBURGH				
Post Code:	EH10 4DN				
Please identify/describe the location of the site or sites					
Northing	671885	Easting	324604		

Ownership of 1	Trees			
Is the applicant the owner o	🛛 Yes 🗌 No			
Details of Tree Protection				
Under what procedures/designations are these tree(s) protected? *				
☐ Tree Preservation Order				
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: *				
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: *	small pine tree, 1 crab apple tree, 1 horse chestnut			
Works description: *	removal of the pine tree, reshape the crab apple tree and crown lift the hors	se chestnut		
Note: if you are submitting a	a schedule of works or a plan, please give the reference number in the descrip	tion 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.				
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.				

Tree Works - A	dditional Information			
Are you proposing to plant re	☐ Yes ☒ No			
If Yes, please explain your re	eplanting proposals on plans or other supporting information.			
Checklist – App	olication 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). *	🛛 Yes 🗌 No		
A full and clear specification	🛛 Yes 🗌 No			
A plan showing location of re	eplacement trees. *	Yes 🛛 No		
The necessary reports as requested by your planning authority to support the reasons for the works you Intend to carry out. *		⊠ Yes □ No		
Photographs. *		🛛 Yes 🗌 No		
No fee is needed with an ap	plication for Tree Works.			
Declare - Tree(s)			
I/we apply for permission to information.	carry out works to trees as described in this form and the accompanying plans/dr	awings and additional		
Declaration Name:	Mr Fergus Morrison			
Declaration Date:	22/02/2024			