

Viewmount Arduthie Road Stonehaven AB39 2DQ Tel: 01467 534333 Email: planningonline@aberdeenshire.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 100662672-001

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)		\leq Applicant T Agent		
Agent Details				
Please enter Agent details	5			
Company/Organisation:	Epic Tree Care Ltd			
Ref. Number:		You must enter a Bo	uilding Name or Number, or both: *	
First Name: *	Elaine	Building Name:	Craigenseat farm	
Last Name: *	Rush	Building Number:		
Telephone Number: *		Address 1 (Street): *	Crossroads	
Extension Number:		Address 2:		
Mobile Number:		Town/City: *	Keith	
Fax Number:		Country: *	Moray	
		Postcode: *	AB55 6LQ	
Email Address: *				
Is the applicant an individ				
T Individual \leq Organ	nisation/Corporate entity			

Applicant Details						
Please enter Applicant details						
Title:	Ms	You must enter a Bu	You must enter a Building Name or Number, or both: *			
Other Title:		Building Name:				
First Name: *	М	Building Number:	3			
Last Name: *	Scott	Address 1 (Street): *	Provost Street			
Company/Organisation		Address 2:				
Telephone Number: *		Town/City: *	Huntly			
Extension Number:		Country: *	Scotland			
Mobile Number:		Postcode: *	AB54 8BB			
Fax Number:						
Email Address: *						
Site Address	Details					
Planning Authority:	Aberdeenshire Council					
Full postal address of th	ne site (including postcode where available	e):				
Address 1:	3 PROVOST STREET					
Address 2:						
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	HUNTLY					
Post Code:	AB54 8BB					
Please identify/describe	the location of the site or sites					
Northing	839761	Easting	353081			

Ownership of T	rees				
Is the applicant the owner of	s the applicant the owner of the tree(s)? * $T = T = T$				
Details of Tree Protection					
Under what procedures/desi	gnations are these tree(s) protected? *				
≤ Tree Preservation Orde	ur				
T Conservation Area					
≤ Condition on Planning F	Permission				
Please provide any relevant Preservation Order, if known	details about the Tree Preservation Order or other protection (e.g. Title and date on). * (Max 500 characters)	f the Tree			
Please provide the application	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	nd 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 - Apple Tree				
Works description: *	Crown reduction				
Note: if you are submitting a	schedule of works or a plan, please give the reference number in the description of	of the works.			
Reason for Pro	posed Tree Works				
	you wish to carry out the proposed works to tree(s). In particular, please indicate of d works include any of the following. If so, your application must be accompanied by				
≤ Health or safety of the tree(s) – e.g. it is diseased, fears that it might break or fall.					
≤ 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)		
ſ	maintenance purposes	
l		

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: Ms Elaine Rush

Declaration Date: 27/02/2024