

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 100662557-001

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

≤ Applicant T Agent

on benail of the applicant	in connection with this application)		△ Applicant 1 Agent		
Agent Details					
Please enter Agent details					
Company/Organisation:	Treescapes Scotland				
Ref. Number:		You must enter a Building Name or Number, or both: *			
First Name: *	Sid	Building Name:	The Steading		
Last Name: *	Nodes	Building Number:	1		
Telephone Number: *	7595021702	Address 1 (Street): *	Drypow		
Extension Number:		Address 2:			
Mobile Number:	07595021702	Town/City: *	Fallin		
Fax Number:		Country: *	Scotland		
		Postcode: *	FK7 7HN		
Email Address: *	mail@treescapesscotland.co.uk				
Is the applicant an individual or an organisation/corporate entity? *					
\leq Individual T Organisation/Corporate entity					

Applicant Details					
Please enter Applicant details					
Title:	Mr	You must enter a Bu	You must enter a Building Name or Number, or both: *		
Other Title:		Building Name:			
First Name: *	Alistair	Building Number:	4		
Last Name: *	Smillie	Address 1 (Street): *	Kenilworth Road		
Company/Organisation	Treescapes Scotland	Address 2:			
Telephone Number: *		Town/City: *	Bridge of Allan		
Extension Number:		Country: *	Scotland		
Mobile Number:		Postcode: *	FK9 4DU		
Fax Number:					
Email Address: *					
Site Address Details					
Planning Authority:	Stirling Council				
Full postal address of the site (including postcode where available):					
Address 1:	ABBEYVIEW				
Address 2:	4 KENILWORTH ROAD				
Address 3:	BRIDGE OF ALLAN				
Address 4:					
Address 5:					
Town/City/Settlement:	STIRLING				
Post Code:	FK9 4DU				
Please identify/describe the location of the site or sites					
Northing	697528	Easting	279396		

Ownership of 1	rees			
Is the applicant the owner of	the tree(s)? *	T Yes \leq No		
Details of Tree	Protection			
Under what procedures/des	gnations are these tree(s) protected? *			
T Tree Preservation Orde	r			
≤ Conservation Area				
≤ Condition on Planning I	Permission			
Please provide any relevant Preservation Order, if known	details about the Tree Preservation Order or other protection (e.g.). * (Max 500 characters)	. Title and date of the Tree		
I have been advised that the area has a TPO on it.				
Please provide the application	on reference no. given to you by your planning			
authority for your previous a	oplication: *			
Identification of Tree(s) and Works Proposed				
Please indicate the tree(s) a	nd provide a full detailed specification of the works you want to ca	arry 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				
_	Free Preservation Order (for example T3 Oak; two Beech and one			
Tree description: *	Beech hedge, Laburnum and Cherry			
Works description: *	Cut down the Beech hedge, Laburnum and Cherry to just above	e ground level		
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)

The trees and soil are moving the wall and it is required to be rebuilt as it has a potential to collapse

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 Yes \leq No

A plan showing location of replacement trees. *

 \leq Yes T No

The necessary reports as requested by your planning authority to support the reasons for the works you Intend to carry out. *

 $T \text{ Yes} \leq \text{ No}$

Photographs. *

 \leq Yes T 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: Mr Sid Nodes

Declaration Date: 04/03/2024