**Part 1 – Landowner’s Details**

|  |  |
| --- | --- |
| Title:  | Forename:  |
| Surname:  |
| Business:  | Position:  |
| Primary Contact Number:  | Alternative Contact Number:  |
| Email:  |
| Address:  |
|  | Postcode:  | Country:  |

**(If owned by a business, the details must be for that business)**

**Please note: We do not accept applications ‘care of’.**

**Agent’s Details**

**(You must submit a mandate with the application. A template can be found on our** [**website**](https://forestry.gov.scot/support-regulations/felling-permissions/)**)**

|  |  |
| --- | --- |
| Title:  | Forename:  |
| Surname:  |
| Organisation:  | Position:  |
| Primary Contact Number:  | Alternative Contact Number:  |
| Email:  |
| Address:  |
|  | Postcode:  | Country:  |

**Part 2a – Property Details**

|  |
| --- |
| Name of Property:  |
| Name of Wood:  |
| Grid Reference (of centre of principal felling area):  |
| Nearest Town or Locality Name:  |
| Local Authority:  |
| Do you give consent for Scottish Forestry to access your land? | YES [ ]  | NO [ ]  |
| **You are not obliged to give us consent to enter your land, however if we are denied access to your land, and cannot carry out an assessment because of this, we may reject your application.****This consent is for access to assess this application as well as monitor compliance with any subsequent approval, where applicable.**  |

**Part 2b – Felling Operations**

**Please provide detailed information about the proposed felling operations.**

When do you wish to start felling? \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

When do you wish to finish felling? \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

**Felling Operations Table**

* The type of operation (Op) should be either *Clear Felling (CF), Thinning (T), Selective Felling (SLF), Felling of Coppice (FC)*, or the *Felling of Individual Trees (FI).*
* The species that can be felled can be expressed by name (*e.g. Oak or Sitka Spruce*) or by standard forestry abbreviation (*e.g. OK or SS*). You must give only one species choice per row.
* You can use Mixed Conifer (MC) or Mixed Broadleaves (MB) but these must make up no more than 20% of the total area of species to be felled. You must give individual species names if they occupy more than 20% of the felling area.
* **If thinning, use the rightmost columns to insert the details based on your preferred method, chosen from the following (select one):**
	+ **Pre/Post stocking density (stems per hectare)** [ ]
	+ **Pre/Post Basal Area (square metres per hectare)** [ ]
	+ **Volume to be removed (cubic metres)** [ ]

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Felling Site/****Cpt** | **Type of Op** | **Species to be felled (one per row)** | **Marking of Trees** | **Est Area (ha)** | **Approx Age (Years)** | **No of Trees**  | **Est Vol m3** | **Thinning Details** **(per ha)** **Pre Post**  |
| *e.g.* | *CF* | *SS* | *n/a* | *0.5* | *45* | *800* | *750* | *n/a* | *n/a* |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  | **Total Area (ha)** |  | **Total Volume m3 :** |  |

**You must give your reasons below for carrying out this work and any additional information that would help us consider your application, such as any constraints or sensitivities that you have planned for, particularly where you want the felling approval to go beyond 2 years. If you have selected thinning, you must provide us with the thinning prescription you intend to use.**

|  |
| --- |
|  |

**Please provide details on the stakeholder engagement you have undertaken, this must include contact with adjacent properties and potentially affected neighbours.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Individual / Organisation** | **Date contacted** | **Date feedback received** | **Response** | **Action** |
| *e.g. Mrs Mackenzie, Fearnan House, meeting* | *14/10/2019* | *20/10/2019* | *Private water supply in SE corner of area to be felled.* | *Ensure route of water supply is protected during operations and liaise with owner.* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Please provide information on any features or issues that you have identified.**

|  |  |  |
| --- | --- | --- |
| **Feature / Issue** | **Constraint** | **Opportunity** |
| *e.g. Scheduled monument in NW corner of site* | *Risk of damage to monument* | *Work with HES to identify exclusion zone and agree actions for working within exclusion zone.* |
|  |  |  |
|  |  |  |
|  |  |  |

**Part 3 – Proposed Restocking**

We expect the area to be restocked unless you are thinning. Under the Forestry and Land Management (Scotland) Act 2018, we attach a continuing condition to the permission to secure restocking. You will be notified of these conditions before we issue the permission.

**Restocking Proposal Table:**

Use the table below to tell us how you intend to restock the areas felled. Please note that you can group felled areas together that are to be restocked in the same way. You must show a restock proposal for 100% of the felled area. If you intend to restock an alternative area, you must submit a map of the alternative area. You must give only one species choice per row.

| **Felling Site/Cpt(s)** | **Restocking proposal** | **Species (one per row)** | **% of site** | **Area (ha)** | **Density (stems per ha)** | **No of Trees** | **Alt Restock Site/Cpt (s)** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  | **Total Area:** |  |  |

* The restocking proposal should be either to replant the felled area (RF), restock by natural regeneration (NR), plant an alternative area (AA), restock with coppice regrowth (CR), restock with individual trees (IT), plant an alternative area with individual trees (AAIT), or create designed open ground (OG).
* If you are intending to deforest the site, insert do not intend to restock (DIR) in the Restocking Proposal column. Note that your application is unlikely to be approved if the site is to be deforested and no alternative area of restocking is proposed (see the Scottish Government’s Policy on Control of Woodland Removal).

**Please give a detailed description of your restocking proposals here. Please provide an evidenced justification where you want the restocking approval to go beyond the standard 2 years, for example the submission of a *Hylobius* management plan. (Use a separate sheet if necessary)**

|  |
| --- |
|  |

**You must provide maps showing the felling and restocking areas of your application. The map must meet the standards we require. These are set out in the** [**mapping standards page**](https://forestry.gov.scot/support-regulations/felling-permissions/mapping-standards) **on our website.**

**Part 4 – The Town and Country Planning (Scotland) Act 1997**

**1. Are there any Tree Preservation Orders on the trees to be felled?**

 **Yes / No** [Please delete as appropriate]

If Yes, give details below:

The following Tree Preservation Order applies to the trees in this application

|  |
| --- |
| Order Made by:  |
| Nearest Town or locality name:  |
| Title of Order:  | Date of Order:  |

**2. Are any of the trees to be felled in a Conservation Area?**

 **Yes / No** [Please delete as appropriate]

The following Conservation Area applies to the trees in this application

Details of Conservation Area:

**Part 5 – Declarations**

**I hereby apply for a permission to fell the trees described in this application and I certify that:**

* I am the landowner or an occupier of the land with written permission of the landowner;
* Where the landowner is a business, I am authorised to sign legal contracts on behalf of that business;
* If I am an acting on behalf of the landowner or occupier, I have submitted a signed mandate form with this application;
* Any necessary consents from any other person(s) if required, have been obtained;
* I have made the necessary checks with the local planning authorities regarding Tree Preservation Orders and Conservation Areas;
* I have notified all stakeholders that may be affected by the felling in this application and sought their views prior to submitting this application;
* I have read, understand and hereby acknowledge that Scottish Ministers may process any of my personal data contained in or relating to this application in accordance with the terms of [Scottish Forestry's Privacy Notice](https://forestry.gov.scot/publications/677-scottish-forestry-data-privacy-notice-felling-permissions/download);
* Where applicable and appropriate I have submitted an EIA screening opinion form for operations contained within this application under the Forestry (Environmental Impact Assessment) (Scotland) Regulations 2017;
* I have read and understand this application fully and, to the best of my knowledge and belief, the information given in this application is complete, true, and accurate; and
* I accept that any false or misleading information provided in this application constitutes an offence and may result in any felling permission based on this application being revoked at any time.

 Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_/\_\_\_/\_\_\_

[This application may only be signed by the owner of the land or the occupier of that land where they have written permission to do so. For land owned by a business it must be signed by someone with the authority to sign legal contracts on behalf of that business. If you are an agent signing this on behalf of the aforementioned you must append a copy of your mandate.]

**DO NOT START FELLING UNTIL YOU HAVE AN APPROVED FELLING PERMISSION**