Historic Environment Scotland
Àrainneachd Eachdraidheil Alba

e-Application for Scheduled Monument Consent

Ancient Monuments and Archaeological Areas Act 1979

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application. You can complete and submit this form by email (hs.smc@scotland.gsi.gov.uk) or by post to Heritage Management Business Support, Historic Environment Scotland, Longmore House, Salisbury Place, Edinburgh, EH9 1SH.

1 Applicant name and address

Title		First Name	Surname
Company / Organisation	THE LACHLAN TRUST.		
Building No / Name	C/O DONALD MACLACHLAN EXECUTIVE TRUSTEE		
Street	WOODSIDE COTTAGE		
Town / City	STRACHUR		
County / Region	ARGYLL		
Postcode	PA 27 8 BY.		

2 Monument to which application applies

Index no		Name	OLD CASTLE LACHLAN
Local Authority	ARGYLL & BUTE	Grid Ref	
Description of location of land	CASTLE RUIN		

3 Pre-application discussions

Have you undertaken pre-application discussions with Historic Environment Scotland? (If yes, please give details below)	Y ☐	N ☒

4 Summary of proposed works (max 20 words)

PROPOSED TIMBER SCREEN / SEAT & TREE REMOVAL

5 Description of proposed works

AS ABOVE

Historic Environment Scotland - Scottish Charity No. SC045925
Registered Address: Longmore House, Salisbury Place, Edinburgh, EH9 1SH

6 List of plans, drawings and other documents accompanying application (continue on separate sheet if necessary)

No	Description	Reference	Document emailed	Document posted
1.	LOCATION PLAN 1:1000	0106.20 (JMC 02.2016)	☐	☑
2.	GROUND FLOOR PLAN	0106.01 (JMC 02.2016)	☐	☑
3.	COURTYARD BARRIER V2	0106 DWG4 JMC 02.2016	☐	☑
4.	PROPOSED SEAT	0106 DWG5 JMC 02.2016	☐	☑
5.			☐	☐

7 Nature Conservation – Protected Places and Species

Will the proposed works affect any of the following:

Yes	No	
☐	☑	Site of Special Scientific Interest
☐	☑	Special Protection Areas
☐	☑	Special Areas of Conservation
☐	☑	European Protected Species

If Yes, please give details below

8 Other information relevant to application

N/A

9 Declaration

☑ I hereby apply for scheduled monument consent for the works described in this application and shown on the accompanying plans and drawings.

☑ I confirm that the information I have given on this form is true and accurate.

Name	MARTIN HADLINGTON	**Date**	15.02.2016
On behalf of	THE LACHLAN TRUST		

Where an application is being dealt with by an agent to whom correspondence should be sent, state the:-

Name of Agent	MARTIN HADLINGTON	**Tel No**	[redacted]
Address	HISTORIC BUILDING CONSULTANT		
		Post Code	PA34 4TL

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