Management Plan Title

20xx to 20xx

Please refer to the Management Plan Guidance note for advice on how to complete your management plan. This template includes a section for thinning permission.

You must have an approved Management Plan before you can apply for Forestry Grant Scheme funding.

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| 1. Details |

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| Management Plan Details | | | |
| Management Plan Name: |  | | |
| Business Reference Number: |  | Main Location Code: |  |
| Grid Reference: (e.g. NH 234 567) |  | Nearest town or locality: |  |
| Local Authority: | |  | |
| Management Plan area (hectares): | |  | |

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| Owner’s Details  **If owned by a business, the details must be for that business. Please note: We do not accept applications ‘care of’.** |

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

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| Agent’s Details  **You must submit a mandate with the application if it includes thinning. A template can be found on our** [**website**](https://forestry.gov.scot/support-regulations/felling-permissions/) |

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

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| Access Consent – Complete if applying for thinning | | |
| **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.** | | |
| Do you give consent for Scottish Forestry to access your property? | YES | NO |

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| Town and Country Planning – Complete if applying for thinning | | |
| Are any of the trees to be felled subject to a Tree Preservation Order? | YES | NO |
| If YES please provide details: | | |
| Are any of the trees to be felled within a Conservation Area? | YES | NO |
| If YES please provide details: | | |

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| Declarations – Complete if applying for thinning | | |
| **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 been mandated to do so; * 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 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/support-regulations/complaints-appeals-and-your-data); * 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; * 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.   [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.] | | |
| Signed: | Print: | Date: |

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| Approval - to be completed by Scottish Forestry staff: | | | |
| Management Plan Reference Number: |  | | |
| Plan Period: (ten years) (day/month/year) | From: | To: | |
| Operations Manager Signature: |  | Approval Date: (dd/mm/yyyy) |  |

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| 2. Woodland Description |

Give information about the following:

* past management of the woodland
* current species and ages
* statutory and non-statutory constraints (e.g. designations, archaeological interests)
* existing or potential public access
* woodland protection

Use the Land Information Search to help you complete this section. For more detailed information on the Native Woodland Survey of Scotland use the Scottish Forestry Map Viewer found on our website: [forestry.gov.scot](http://www.forestry.gov.scot)

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| 2.1 Maps required |

Provide maps to support your plan, as outlined in the guidance note. Please list all of the maps that you are including with your management plan.

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| List of maps: |
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| 2.2 History of management |
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| 2.3 Species and age |
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| 2.4 Constraints and designations |
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| 2.5 Public access |
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| 2.6 Woodland Protection |
| Plant Health (including tree health and invasive or noxious plants) |
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| Deer, Livestock and other mammals |
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| Grey Squirrels |
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| Water & Soil (soil erosion, acidification of water, pollution etc.) |
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| Environment (flooding, wind damage, fire, invasive species etc.) |
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| Climate Change Resilience (provenance, lack of diversity, uniform structure) |
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| 3. Vision and Objectives |

Tell us how you intend to manage the woodland in the long term and your goals for its development.

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| 3.1 Vision |
| Describe your long term vision for the woodland(s). |
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| 3.2 Management objectives |

Give your objectives of management and also how you will manage the woodland sustainably. Your objectives should be specific and you should also be able to measure their outcomes.

| No. | Objectives (including environmental, economic and social considerations) |
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| 4. Stakeholder Engagement |

Please provide details on the stakeholder engagement you have undertaken, this must include contact with adjacent properties and potentially affected neighbours depending on the work you intend on carrying out in the woodland (e.g. thinning) and the constraints or designations that have been identified.

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| Individual/ Organisation | Date contacted | Date feedback received | Response | Action |
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| 5. Analysis and Management Strategy |

Analyse the information from the previous sections and identify how to make best use of your woodland and its resources to achieve your objectives.

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| 5.1 Constraints and Opportunities |

Using the table below analyse any issues raised or relevant features within your woodland and record the constraints and opportunities.

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| Feature/Issue | Constraint | Opportunity |
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| Additional detail: | | |

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| 5.2 Management Strategy |

Following your analysis, provide a broad statement describing your management strategy. Consider all aspects (economics, access, biodiversity, landscape) and pay particular attention to your silvicultural strategy for meeting your management objectives.

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| 6. Management Proposals |

Tell us the management operations you intend to carry out over the next 10 years to help meet your management objectives for the woodland. The submission of this plan will be considered as an application for permission to thin the woodland over the 10 year plan period, subject to the completion of Table 1 and the submission of appropriate maps. If you intend to carry out other types of felling (e.g. clearfelling) you must apply for that permission separately.

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| 6.1 Silvicultural Practice |
| Outline silvicultural practice and management prescriptions. Include any past management practice that is relevant and the strategies to address the issues identified in section 5. |
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| 6.1 Thinning Prescription |
| If you are applying for thinning, you must provide a map as per Appendix 2 of the Forest Plan Applicant’s Guidance. The map must show all areas proposed for thinning. Provide any further details required here in reference to your map(s). |
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**Table 1 – Thinning**

This table shows the total management plan area as well as the thinning compartments proposed for management. The felling site/compartment in this table must be shown as the same on the thinning map(s). Please select method of displaying thinning regime:

Pre/Post stocking density Pre/Post basal area Volume to be removed

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| **Total Plan Area:** | |  | **hectares** |  |  |  |  |  | | |
| **Thinning Compartment** | **Area (ha)** | **%** | **Species to be felled (one per row)** | **Age (Years)** | **Marking of Trees** | **No of Trees** | **Volume (m3)** | **Thinning Density**  **(per ha)**  **Pre Post Total** | | |
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| **Total Area** |  |  |  | | **Total Volume m3** | |  | **Total to be removed:** | |  |