

APPLICATION FOR TREE PROTECTION LOCAL LAW PERMIT

under Tree Protection Local Law

Office Use Only	APPLICATION NUMBER:	DATE RECEIVED:
	APPOINTMENT:	

1. ADDRESS WHERE THE TREE(S) ARE LOCATED

Address:

2. THE APPLICANT

Name:		
Postal Address:		Postcode:
Home Ph:	Work Ph:	Mobile:
Email Address:		
Are you the owner of the land? <input type="checkbox"/> Yes - Go to step 4 <input type="checkbox"/> No - Go to step 3		

3. THE OWNER - Owner of tree(s)

Name:	
<i>If Owner is a Company/Body Corporate please state Contact Person and attach authorisation confirmation</i>	
Contact Person:	
Postal Address:	Postcode:
Declaration: I consent to the works for which this application seeks permission.	
Owner's Signature: _____	

4. SITE INSPECTION

<input type="checkbox"/>	I do not request to be present at the time of inspection and authorise Council Officers to enter my property for the purpose of assessing trees described on the attached pages
OR	
<input type="checkbox"/>	I do request to be present at the time of inspection and require an appointment during business hours.
Contact Person: _____ Contact No.: _____	
ACCESS RESTRICTIONS: (Please include details of animals, locked gates etc that may limit inspection)	

Office use only	FILE ORDERED:	Y	N	OVERLAYS:	PAID:
	PLANNING HISTORY:				
	TREE HISTORY:				

5. TREE DETAILS

TREE 1

<input type="checkbox"/> Removal	Common Name/Species:
<input type="checkbox"/> Pruning	Trunk Circumference @ 1.5m above ground:
<input type="checkbox"/> Root excavation	<i>(Add up multiple stems)</i>
Why are the works required:	
<input type="checkbox"/> Tree health/Safety concern	
<input type="checkbox"/> New dwelling/extension	
<input type="checkbox"/> Two or more dwellings	
<input type="checkbox"/> Other <i>(please specify)</i>	

TREE 2

<input type="checkbox"/> Removal	Common Name/Species:
<input type="checkbox"/> Pruning	Trunk Circumference @ 1.5m above ground:
<input type="checkbox"/> Root excavation	<i>(Add up multiple stems)</i>
Why are the works required:	
<input type="checkbox"/> Tree health/Safety concern	
<input type="checkbox"/> New dwelling/extension	
<input type="checkbox"/> Two or more dwellings	
<input type="checkbox"/> Other <i>(please specify)</i>	

TREE 3

<input type="checkbox"/> Removal	Common Name/Species:
<input type="checkbox"/> Pruning	Trunk Circumference @ 1.5m above ground:
<input type="checkbox"/> Root excavation	<i>(Add up multiple stems)</i>
Why are the works required:	
<input type="checkbox"/> Tree health/Safety concern	
<input type="checkbox"/> New dwelling/extension	
<input type="checkbox"/> Two or more dwellings	
<input type="checkbox"/> Other <i>(please specify)</i>	

TREE 4

<input type="checkbox"/> Removal	Common Name/Species:
<input type="checkbox"/> Pruning	Trunk Circumference @ 1.5m above ground:
<input type="checkbox"/> Root excavation	<i>(Add up multiple stems)</i>
Why are the works required:	
<input type="checkbox"/> Tree health/Safety concern	
<input type="checkbox"/> New dwelling/extension	
<input type="checkbox"/> Two or more dwellings	
<input type="checkbox"/> Other <i>(please specify)</i>	

6. PLAN OF PROPERTY

Sketch layout of the site indicating the following:

- a) location of trees proposed for removal/pruning/root excavation
- b) location of replacement trees
- c) key features including road, house, garage, driveway etc.

Legend



Tree(s) for removal/pruning/root excavation

Please note Council may require replacement trees as a Permit condition

7. PAYMENT

☐ Removal: \$77.00 per tree

☐ Pruning (Listed Significant Tree only): \$38.50

Payment total: \$_____

Payment method:

☐ Cash

☐ Cheque

☐ Credit Card (in person)

☐ Credit Card Authorisation Form

8. INFORMATION CHECKLIST

Have you:

- ☐ Completed all sections of this form?
- ☐ Attached the plan of the property indicating the location of trees to be removed/pruned/root excavation and proposed replacement trees?
- ☐ Included payment details
- ☐ Attached plans of development/building/extension (note: application may not proceed unless this information is provided)

You must give full details of the tree works and a plan of the property indicating trees to be removed/pruned/root excavation. If you do not give enough detail or give a suitable description of the works, you will be asked for more information. This **WILL DELAY** processing of your application.

Please note that Council may require the applicant to provide a report from a suitably qualified arborist in order to fully assess this application.

9. DECLARATION

I declare that all of the information contained in this application is true.

Signature: _____ **Date:** _____

Name (print): _____

Please note it is against the law to give false or misleading information. You may receive a heavy fine and your permit may be cancelled if you provide false or misleading information.

10. SUBMISSION - send completed form and all supporting documents to:

Boroondara@boroondara.vic.gov.au

OR

**STATUTORY PLANNING DEPARTMENT
CITY OF BOROONDARA
Private Bag 1
Camberwell Vic 3124**

PRIVACY STATEMENT

The personal information requested on this form is being collected by Council to assist in the registration and processing of your application.

The personal information will be used solely by Council for that primary purpose or directly related purposes. Council must make this information available to comply with the Freedom of Information Act 1982.

If this information is not collected, Council will be unable to process your application.

The applicant understands that the personal information provided is for the registration, processing and assessment of the application and that he or she may apply to Council for access to and/or amendment of the information. Requests for access and or correction should be made to Council's Privacy Officer.