

Tree Pruning / Removal Application Form

A Tree Preservation Order applies to the whole of the Penrith City Council area. This prohibits the pruning or removal of any tree with a height greater than 3 metres, without the written consent of Council. Any person, who contravenes the provisions of the TPO, shall be guilty of an offence and liable to prosecution, fines of \$1500 (on the spot) up to \$1,100,000 can be imposed.

It is anticipated that the applicant or agent will not be at the property when Council's officer inspects the tree/s. It is important that the relevant tree is clearly identified (i.e. if identification is not possible tie a ribbon or string around the tree/s). Initially appointments are not made. An inspector will attempt to make an assessment ASAP (usually within 20 working days) and will make an appointment if this cannot be done.

Complete this form in full, with detailed justification for proposed tree works and payment. **This application and the information on it form the basis of the determination.**

Owner of Property/Applicant's Name: Mr/Mrs/Ms _____

Address of property: _____

Phone Numbers: mobile: _____ home: _____ work: _____

Postal Address: (if different to above) _____

The owner of the tree must sign here

SIGNATURE OF OWNER/ AUTHORISED PERSON: _____

Please print name: Mr/ Mrs/ Ms _____ Date: _____

Will access need to be arranged? Y N Contact: _____ Phone: _____

DETAILS OF REQUEST:

• **Number of Trees:** _____ **Type/Species of Tree/s:**(e.g. *Eucalyptus, Palm, Conifer, etc*) _____

• What do you propose to do to the tree? **Please tick** Remove: Prune:

Please note: For each tree approved for removal, a replacement tree must be planted.

• **Location of Tree/s:** (e.g. *front yard back yard, neighbours yard – show on plan on other side*)

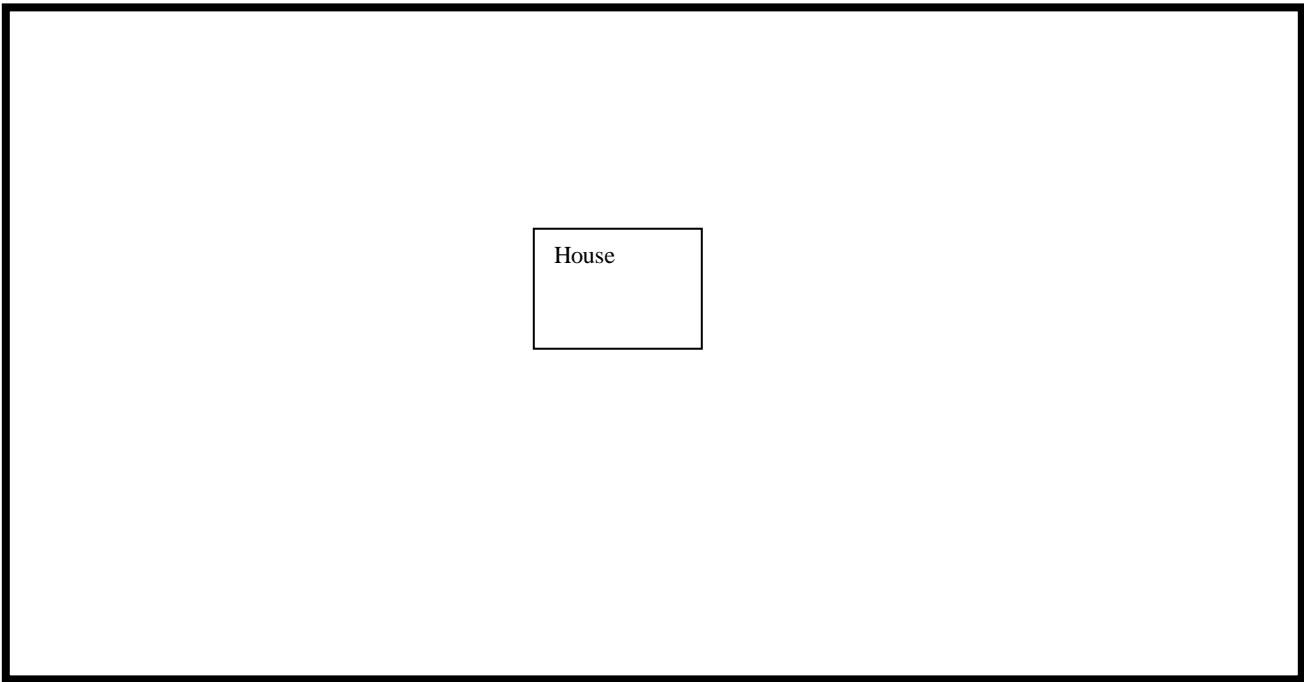
• **Location of property:** (nearest cross street or identifying feature)

• **Details of any dogs on Property:** (indicate number and temperament):

REASON FOR REQUEST: (In this section include the basis and full justification for the proposal and any supporting information e.g. arborist's report)

PLAN:

Please provide a detailed sketch of the location of tree/s to be inspected. Show and name streets/buildings, boundaries, driveways, structures, and other features.



ADDITIONAL COMMENTS (*ATTACH ANY EXTRA INFORMATION / COMMENTS*)

Administration fee must be paid when lodging this application. Do you want to pay by post?

PAYMENT DETAILS: CASH/CHEQUE CREDIT CARD: MASTERCARD VISA

Credit Card Number: _____/_____/_____

Card Holder Name: _____ Expiry date: _____

Signature of Card Holder: _____

Office Use Only: Admin Fee: \$38.00 Receipt No: _____ Date: _____

Please note 0.6% will be charged on all credit card Transactions.