FORM

→ APPLICATION FOR TREE MANAGEMENT PERMIT



Section 1	Applicant Details			TMO:				
Applicant's Name	Surname			Mr / Mrs / Other				
	Given Names							
Organisation (if applicable)	onen names							
Applicant's Address and	Number and Street							
Contact Details	PO Box / DX / Other							
	Suburb / Town State			Postcode				
	Phone	Mobile		1				
The owner consents to this	application and allows Council officers to enter		urpose of in	specting	the tree(s)			
Applicant's Signature	Date:				/ /			
Section 2	Location of Tree(s) – if different to Sect	tion 1						
Property Address - (where tree(s) is/are located)	Number and Street			1				
(where theels) is/are tocateur	Suburb / Town	State			Postcode			
Owner's Name and Contact Details	Surname			Mr / Mrs / Other				
	Given Names							
	Phone	Mobile						
The owner consents to this	application and allows Council officers to enter	the property for the p	urpose of in	specting	the tree(s)			
Owner's Signature	Date of Consent: / /							
Section 3	Further Information							
Section 3.1	Is the property a critical habitat or part of a cr	itical habitat and/or a	heritage lis	ted site:				
Section 3.2	Is the pruning/removal of the tree(s) likely to significantly affect threatened species, populations, ecological							
	communities or their habitats? □ No □ Yes							
	Has any previous application been made to prune or remove the tree(s)?							
Section 3.3	☐ No ☐ Yes - <i>if yes, provide details</i> Permit							
Section 3.4	Is the property subject to any current development application, ie house, house extensions, swimming pool, garage or subdivision?							
	☐ No ☐ Yes - if yes, provide details Application Number ☐							
	Note : If yes, the pruning/removal of the tree(s) should be assessed as part of that development application. Are you aware of any recent approval consent which requires any tree(s) to be retained on the property?							
	☐ No ☐ Yes - if yes, provide details	Application N	lumber					
Section 3.5		Is the dog (tick approp						
			Aggressive		Other			
Section 3.6	Is access available for Council's TMP officer to inspect the tree(s)?	Please state why not	leg, locked	gateJ				
		Council will contact you once your application ha			espect the tree(s)			
		, application na						

- Address: Wollongong City Council, 41 Burelli Street, Wollongong NSW 2500 Postal: Locked Bag 8821 Wollongong DC NSW 2500
- **ABN** 63 139 525 939 GST Registered

→ APPLICATION FOR TREE MANAGEMENT PERMIT



Section 4	Trees(s) Details							
Tree Location Plan If property is a complex, eg units, townhouses, caravan park or school, please attach a detailed site plan.	The applicant requests Council's consent to carry out works on trees on the property described above as follows: • Fill out location map to identify the location of the trees and other buildings on the affected property. Number the trees to correspond with details below. • A total of 5 trees only per application, up to a total of 15 trees (3 applications). As the applicant and/or owner may not be at the property when it is inspected by Council's officer, the tree(s) described above should be clearly marked eg, by tying a piece of string around each tree.	Street	Tree Location Plan	(aerial view)				
Tree Details (Tick as appropriate)	Type of Tree (if known) – Number the trees to correspond with the Tree	Location	on Plan above	Prune	Remove			
	1							
	2							
	3							
	4							
	5							
Reasons for Tree	Briefly Outline the Reasons for Pruning/Removal of each Tree							
Pruning/Removal	1							
	2							
	5							
Section 5	How To Pay							
Fee	Fees are as per Council's Fees and Charges (GST exempt). \$64 Note: A total of five trees only per application. Do you receive the WCC pension rebate?							
Lodgement	 Option 1 - Take form with payment to Customer Service, Ground Floor, Council Administration Building, 41 Burelli Street, Wollongong. Option 2 - Lodge application online via Council's website: www.wollongong.nsw.gov.au/onlineservices Option 3 - Mail form with payments to Wollongong City Council, Locked Bag 8821, Wollongong DC NSW 2500. Payments sent by post should be by money order or cheque made in favour of Wollongong City Council. 							
Office Use Only	Amount Paid:		Receipt No:					

Privacy Notification (Privacy and Personal Information Protection Act 1998 - Section 10)

The personal information that Council is collecting from you on this application form is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 ('the Act'). The intended recipients of the personal information are officers within the Council and any person wishing to inspect the application in accordance with the Local Government Act 1993. The supply of the information by you is not voluntary and if you cannot provide or do not wish to provide the information sought, the Council will be unable to process your application. You may make application for access or amendment to information held by Council. You may also make a request that Council suppress your personal information from a public register. Council will consider any such application in accordance with the Act. Council is to be regarded as the agency that holds the information. Enquiries concerning this matter can be addressed to Council by telephoning 4227 7111.

- Address: Wollongong City Council, 41 Burelli Street, Wollongong NSW 2500 Postal: Locked Bag 8821 Wollongong DC NSW 2500
- Phone: (02) 4227 7111 Fax: (02) 4227 7277 Email: council@wollongong.nsw.gov.au Web: www.wollongong.nsw.gov.au
- ABN 63 139 525 939 GST Registered