

FILE: _____

APPLICATION FOR FELLING OF TREES ON COUNCIL LAND

NAME OF APPLICANT: _____

ADDRESS OF APPLICANT: _____



NUMBER: _____

SITE ADDRESS OF TREE/S: _____

BOTANICAL NAME OF TREE (if known): _____

COMMON NAME OF TREE: _____

(DETAILS OF TREE):

TRUNK DIAMETER (Measured at 1 metre above ground level): _____

HEIGHT: _____

REASONS FOR FELLING:

- | | |
|---|--|
| <input type="checkbox"/> unsuitability to the immediate area | <input type="checkbox"/> shading causing solar access issues |
| <input type="checkbox"/> maintaining existing significant views | <input type="checkbox"/> perceived risk |
| <input type="checkbox"/> nuisance caused by significant shedding material | <input type="checkbox"/> other (details) _____ |

A sketch plan and/or photo of the location is to be submitted with this application, giving accurate measurements of the tree's distance from other structures, eg kerbs, buildings, driveways, other trees, underground services etc.

SIGNATURE: _____

DATE: _____

ASSESSMENT REPORT (*Office Use Only*)

TYPE OF TREE: _____

ISSUED TO ARBORIST / /

ARBORIST RECOMMENDATION: REMOVE/RETAIN

POLICY CHECKLIST:

INTEGRATED ASSESSMENT

Y / N Is part of a significant native community identified in the Natural Assets Inventory.

Y / N Is recognised as part of a heritage site listed under Australian or Tasmanian Heritage Register.

Y / N Is required to be retained as part of a Development approval.

Y / N Provisions of the Planning Scheme prohibit removal, or requires a permit.

Y / N Is listed on National Heritage Register or has historical significance

ASSET MANAGEMENT

Y / N Is identified under the Threatened Species Protection Act

Y / N Is recorded as to be retained on an approved Master Streetscape Plan.

Y / N Is recorded as to be retained on an approved Landscape Plan.

Y / N Is recorded as to be retained on an approved Land Management Plan.

Y / N Is recorded as to be retained on an approved Land/Coast Care Activity Plan.

Y / N Is within an area covered by the Regional Forest Agreement.

Y / N Is located on land leased by Council where land owner's authority is required.

Y / N Neighbourhood opposition to removal (responses attached)

ASSESSMENT OF REQUESTED REASONS FOR FELLING:

RECOMMENDATION:

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RESPONSIBLE OFFICER:
