

Do not use this for exemptions in clause 3.2 of Councils DCP This document is to be used after reviewing tree information on Councils website.

perty Details
Title:
tle he Unit No House No Street
and Statement
Business name
AQF Levelin arboriculture. Certificate No
t n do



- 3. assessed each tree for hollows or other likely habitat, and either (circle <u>a</u> or <u>b</u> below):
 - a) found no evidence, or
 - b) in the case of 2 a) above, arranged for local wildlife group (e.g. Wires) to attend during removal.
- 4. in the case of 2 a), only removed tree/s where their structure was compromised, and there was no practical alternative to retain them, and
- 5. in the case of 2 a) provided with this document:
 - a documented tree inspection, including a detailed tree risk assessment in accordance with industry best practice tree condition assessment methodology, and
 - supporting evidence, which is to include clear and relevant photographs of the tree(s), any defects, failed sections, interactions with structures and potential targets, and
 - a review of options for managing risk other than by tree removal, and
 - a summary of the risk abatement options and implications.
- 6. provide a site plan below to show where the tree/s location in relation to the dwellings and boundaries.

Site Plan with Tree/s located in relation to structures include where street is located						

The following information is provided to support this form at the above address. Relevant information regarding disclaimers, photos, risk or hazard assessment, and any other evidence to support the application, is attached to this form.



Condition of tree/s	(also attach Risk/Haz	ard Assessment).		
Why tree is consident and review of option		k to Human Life or	Property? What altern	atives were considered



Name of Arborist:			(Print cl	early)	
Signature of Arborist:			Date:		
Name of person who owns the Tree/s:					
Sign:	Date: .				
Name of neighbouring tree/s owner (if any)				
Address of neighbouring tree/s:					
Sign neighbouring tree owner:	Date	:			
Only if a Company or Owners Corporation Contact person					
Company or Owners Corporation authoris name:	•				
Company or Owners Corporation authoris signature:					
Owners Corporation seal:					