

APPLICATION FOR

REQUEST FOR REVIEW OF TREE DETERMINATION WAVERLEY

To be lodged within six (6) months of decision made under Environmental Planning and Assessment Act 1979.

A FEE IS PAYABLE FOR LODGEMENT OF THIS APPLICATION.

THIS APPLICATION MUST INCLUDE A REPORT FROM A CONSULTING ARBORIST (AQF LEVEL 5).

	_	decision about your application or Customer Service team on (02			
TPO Number	ТРО-	/202			
Section 1: Ap	plicant D	etails			
	_	nal determination will be sent to the ing any approved work.	listed applicant via email, plea	ase advise if this is unsuitable. The appli	icant
Title [□ Mr	☐ Mrs	☐ Ms	☐ Other	
Given Name/s:			Surname:		
Company Name (if	applicable):				
Address:					
Suburb:			Post (Code:	
Email Address:					
Phone:			Mobile No:		
Section 2: Tre	ee Addres	:6			
		f trees are located on different prop	erties, a separate application i	s required for each property.	
Street Number:		Street Name:			
Suburb:			Post (Code:	
Coation 2: Ac	T- 1	The Cite			
Section 3: Access To The Site Does Council require your presence to enter the site? □ Yes] No
Does Council require your presence to enter the site? ☐ Yes ☐ N If your presence is required then please provide contact details.					1110
Are there any special requirements for entering the site? (If Yes, please provide details below. e.g. will leave side gate open, dog in yard but friendly)] No	

Last updated: 17/04/2024

Postal address

PO Box 9, Bondi Junction NSW 1355 ABN 12 502 583 608

Waverley Council Service Centres

Bondi Junction Customer Service Centre, 55 Spring St, Bondi Junction NSW 2022 Bondi Pavilion Customer Service (Welcome Centre), Queen Elizabeth Drive, Bondi Beach NSW 2026

W waverley.nsw.gov.au E info@waverley.nsw.gov.au T (02) 9083 8000

1/4

Section 4: Owner's Consent

If an application is being presented by a person other than the owner of the property, then written owners consent MUST be provided on the application form.

If the tree is located on common property of a residential flat building or townhouse development, you must submit a written request from either the Body Corporate or the Managing Agent, together with either the minutes of a meeting or a letter signed by the majority of the owners

consciung to the work.							
Given Name/s:			Surname:				
Address:							
Suburb:				Post Code:			
Email Address:							
Phone:			Мо	bile No:			
Signature/s of all owner agent (Supply additional)							
Minutes supplied	☐ Yes	□ No	Supporting le	etter attached	☐ Yes	□ No	
Section 5: Addition Is the site in a heritage Is the tree listed on the Section 6: Propo	conservation area? Significant Tree Re				□ Yes	□ No	
(Please complete the fo	ollowing table and a	ttach extra pages fo	or additional trees	3)			
NOTE: The fee for the a of trees identified.	pplication is in acco	rdance with Counci	l's Pricing Policy, I	ees and Charges	and is only bas	ed on the number	
Tree Species /	Lo	cation	Work Required		Reason for Works		
Common Name	(i.e. adjacent	(i.e. adjacent to rear boundary)		Tick (✓) only ONE box per tree		(max. 23 character. If additional space is required, please attach a supporting letter.)	
(if known)			Prune	Remove			
1							
2							

Section 7: Position of Tree/s

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Please draw a sketch of your property clearly showing the street, the approximate location of all buildings in relation to property boundaries, and the tree/s listed above by the number reference.

Last updated: 17/04/2024 2/4

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							N A
Section 8: Reason For	Review						
Please state reason for this rev for information)	ew and include any ad	dditional supporting s	oecialist reports (s	ee Tree I	Managemer	nt Guideline	es 2022
Section 9: Declaration							
Please tick box:							
$\ \square$ I apply for consent to carry permit has been issued by Coul		d in this application a	nd acknowledge th	nat no wo	ork can be c	arried out (until a
\square I declare that the information	on given is true and co	orrect.					
\square I understand if the informatequested.	ion supplied is incom	olete the application r	nay be delayed, re	jected, o	r further in	formation	
☐ I understand that I must no removed	tify Council's Tree Ma	nagement via <u>treemgt</u>	@waverley.nsw.g	<u>ov.au</u> as	soon as the	tree/s hav	e been
☐ I understand that any tree(s canopy size when mature, and	•		·		•		_
☐ I have included a copy of a	Level 5 Arborist Repor	t.					
☐ I understand that if replacem Council's offset tree planting pro		·		rty, you v	vill be asked	to contribu	ute to
Applicant's Signature				Date	/	/	

3/4 Last updated: 17/04/2024

How To Submit Your Application

Download this form to your computer as a PDF file and use Adobe Acrobat to complete the form.

E-mail: Email your PDF application form to: treemgt@waverley.nsw.gov.au

Mail: PO Box 9, Bondi Junction 1355

In person: At any of Council's Customer Service Centres:

• Bondi Junction Customer Service Centre, 55 Spring St, Bondi Junction NSW 2022

Opening Hours: 9am - 5pm Monday to Friday

• Bondi Pavilion Customer Service (Welcome Centre), Queen Elizabeth Drive, Bondi Beach NSW 2026

Opening Hours: 10am - 4pm Monday to Sunday

If you need assistance, please contact our Customer Service team on (02) 9083-8000 or chat with us live at waverley.nsw.gov.au.

Fees

Lodgement fee: \$88.00

Payment Methods

Cash, EFTPOS, Cheque, or Credit Card (Please note, a 0.8% surcharge applies to credit card payments.)

Online: Once your application has been processed, an invoice will be emailed to you.

At any of Council's Customer Service Centres: In person:

• Bondi Junction Customer Service Centre, 55 Spring St, Bondi Junction NSW 2022

Opening Hours: 9am - 5pm Monday to Friday

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Opening Hours: 10am - 4pm Monday to Sunday

Phone: (02) 9083-8000, Opening Hours: 9am - 5pm Monday to Friday

Mail: PO Box 9, Bondi Junction NSW 1355

Cheque or Money Order made payable to Waverley Council, please include a copy of this application.

OFFICE USE ONLY	Logged By:	
Lodgement Fees:		Date Paid:
	Concession rate - 75% discount against respective fee. (Concession card, health benefit card or equivalent)	Amount:
\$88.00 (Cost Code. FIVITIRE)		Receipt No.:

4/4 Last updated: 17/04/2024