



## OPERATIONS DEPARTMENT REQUEST FOR TREE WORKS

818 Pacific Highway, Gordon NSW 2072 | Locked Bag 1006, Gordon NSW 2072  
T 02 9424 0000 F 02 9424 0001 DX 8703 Gordon TTY 02 9424 0875  
E [kmc@kmc.nsw.gov.au](mailto:kmc@kmc.nsw.gov.au) W [www.kmc.nsw.gov.au](http://www.kmc.nsw.gov.au) ABN 86 408 856 411

### PLEASE NOTE:

**THE CORRECT FEE MUST BE PAID AT THE TIME OF LODGEMENT OF THIS APPLICATION**

Address of property containing trees: \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Applicant's name (Mr/Mrs/Ms): \_\_\_\_\_

*(If you are not the property owner, please provide authorisation from owner)*

Telephone:

Home: \_\_\_\_\_ Business: \_\_\_\_\_ Mobile: \_\_\_\_\_

Nearest cross street: \_\_\_\_\_

Applicant's postal address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Has an application for tree works been made previously for this tree/s Yes  No

Has the retention of the tree/s been the subject to a condition of a Development Application that has been lodged with Council within the last 5 years. Yes  No

If yes, please provide details: \_\_\_\_\_

Is the tree located within a Heritage Conservation Area (HCA) or heritage item. Yes  No

*Please Note: - if yes, should Council determine the tree works to be more than minor or they may adversely affect the HCA or heritage item, a development application will be required.*

I have considered the Rural Fire Service 10/50 vegetation clearing Code of Practice for NSW, prior to completing this application form and therefore request approval from Council to prune or remove tree/s on private land. Yes

Number of trees you wish to remove:  Number of trees you wish to prune:

*Please Note: – it is not necessary for the applicant to be present at time of inspection, as written confirmation of determination will be forwarded.*

Is access to the tree/s available? Yes  No

Do you have a dog that may threaten the inspector Yes  No

Tree Owner's Name (please print): \_\_\_\_\_

Tree Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DETAILS AND LOCATION OF TREE/S

**BLOCK PLAN**

Site plan indicating and numbering trees to be assessed and showing dwelling, street frontage & driveway. Please number clearly, trees to be removed and trees to be pruned.

**To assist in identification of trees to be assessed, please mark the tree/s at the property with a ribbon/rope or non-permanent marking.**

Type of tree and reasons for removal/pruning

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**FEES** (current until 30/06/2017)

Tree Removal Application Fee (one tree) .....	\$82.00
Tree Pruning Application Fee (one tree).....	\$41.00
<b>For each additional tree to be inspected, whether for removal or pruning .....</b>	<b>\$13.00</b>
Tree Review Application (for each tree) .....	\$58.00
*Applications by Pensioners - Tree Removal.....	\$39.00
*Applications by Pensioners - Tree Pruning .....	\$17.00
*Applications by Pensioners - Review of Application .....	\$39.00
<b>* Pension Concession Card must be produced</b>	

# KU-RING-GAI COUNCIL

## CREDIT CARD PAYMENT FORM



818 Pacific Highway, Gordon NSW 2072 | Locked Bag 1006, Gordon. NSW 2072  
**T** 02 9424 0000 **F** 02 9424 0001 **DX** 8703 Gordon **TTY** 133 677  
**E** kmc@kmc.nsw.gov.au **W** www.kmc.nsw.gov.au **ABN** 86 408 856 411

<b>Introduction</b>	This form can be used for providing payment by credit card for Council services. Please attach this form with any relevant documentation to ensure fast processing of your payment.
<b>Applicant Details</b>	Name:.....  Mailing Address:.....  Phone Number:.....
<b>Amount to be Debited</b>	\$
<b>Card Details</b>	Card No: _____  Expiry: __ / __  Name on Card:.....  Signature:.....Date:.....  <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express  <b>NOTE: A merchant fee surcharge is applicable to all credit card payments</b>
<b>Your Privacy</b>	The personal information you have supplied on this form is legally required and assists Council officers when determining your application. Failure to provide some details may result in rejection or delays. The details provided are not publicly available. At any time you have access to view or correct any information you have supplied.
<b>Office Use Only</b>	CSO Initials: _____ Date: _____  Receipt No: _____