



Cnr Queen Street and Broughton Street  
 (PO Box 57) Campbelltown 2560  
 Phone (02) 4645 4000 Fax (02) 4645 4111 DX5114

**TREE REMOVAL/TREE PRUNING APPLICATION**  
**Section 78A Environmental Planning and Assessment Act 1979**

The information requested by Council on this form may constitute personal information under the *Privacy and Personal Information Protection Act 1998*. Council is allowed to collect the information from you to consider this matter. Supplying this information is voluntary. However if you cannot or do not wish to provide the information, we may not be able to consider the matter. If you need further details, please contact the Privacy Officer, Campbelltown City Council, cnr Queen and Broughton Streets, Campbelltown.

This application is for the removal or pruning of up to four trees only.

A Development Application including an Arborist's Report, Site Plan and Statement of Environmental Effects is required for the pruning or removal of five trees or more, or any other tree or vegetation as defined under part 11.3.3 (b) of the Campbelltown (Sustainable City) Development Control Plan 2012.

**An application to remove or prune a tree higher than 10 metres must include written evidence from a qualified arborist that states why the tree needs to be removed or pruned. If the tree is causing damage to water/sewer pipes, a report from a licensed plumber is required. If the tree is causing structural damage to a building, a report from a structural engineer is required. Please refer to Part 11.3.4.1 of the Campbelltown (Sustainable City) Development Control Plan 2012, for additional information.**

Please ensure to attach copies of supporting reports/documents /photographs/surveyor report if required, and completed site plan with your payment in accordance with Council's Fees and Charges.

Have you applied for a permit or development application to Council, to remove any trees on this property in the last five years? Yes/No If Yes: How many trees? Application No: /

<b>Application Number:</b> TA..... / .....	<b>Fees</b>	<b>1- 4 trees \$81.90</b>
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<b>Part 1</b>	<b>Property Owner's Consent</b>		
<p>Must be signed by all of the owners of the land or by the owners' legal representative. If more than two owners, please attach separate information.</p> <p>If the owner is a Company or Owners' Association, this must be signed by a Director or Secretary (or authorised delegate) under common seal.</p>	As owner(s) of the land to which this application relates, I/we consent to this application. I/we also give consent for an authorised Council officer or agents to enter (without prior notice) the land to carry out inspections.		
	Owner 1 Name:		
	Address:		Phone No:
	Owner 2 Name:		
	Address:		Phone No:
	If you are signing on the owners' behalf as the owners' legal representative, please state the nature of your legal authority and attach documentary evidence e.g. Power of Attorney, Executor, Trustee, Company Director.		

**Declaration**  
 I/we are applying for consent to carry out the development described in this application. I/we declare that all information given is true and correct. I/we also understand that if incomplete, the application may be delayed or rejected. More information may be requested as required.

<b>Owner 1 Signature:</b>		<b>Date</b>	
<b>Owner 2 Signature:</b>		<b>Date</b>	

Part 2	Applicants Details	
	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other:	
	Family Name (or Company Name):	
	Given Names (or ACN):	ABN:
	Postal Address / DX:	
	Post code:	
	Phone:	Alternative phone:
	Fax:	Email:

Part 3	Site and Tree Details	
Location and title description of the property	Street No:	Street:
	Suburb:	
	Nearest Cross Street:	
	Lot:	DP: Section:

Inspection	Will it be necessary for the inspecting Officer to make special arrangements for access into your property? (eg security, dogs etc)	
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If yes, contact name:	Phone:

Tree Location	Mark on the site plan below the location of the tree/s to be inspected with a <b>cross (x)</b> and number accordingly. Please mark driveway on plan.	

**PLEASE COMPLETE ALL SECTIONS MARKED WITH AN (\*) BELOW**

Tree	Prune/Remove *	Approx Height *	Common Name *	Scientific Name *	Reason for Removal/Pruning *
1					
2					
3					
4					

**How to lodge this application**

<p><b>Address this application to:</b></p> <p>General Manager Campbelltown City Council</p> <p>You can send the application to us by any of the following methods:</p> <p><b>Mail:</b> PO Box 57, CAMPBELLTOWN NSW 2560</p> <p><b>Document Exchange :</b> DX5114, CAMPBELLTOWN NSW</p> <p><b>Courier or Personal Delivery:</b> Cnr Queen Street &amp; Broughton Street CAMPBELLTOWN NSW</p> <p><b>Fax:</b> 02 4645 4111</p>	<p><b>How to contact us:</b></p> <p>Phone: (02) 4645 4000 Fax: (02) 4645 4111 Email: <a href="mailto:council@campbelltown.nsw.gov.au">council@campbelltown.nsw.gov.au</a></p> <p><b>Fees:</b> Please refer to Council's Fees and Charges located on Council's website: <a href="http://www.campbelltown.nsw.gov.au">www.campbelltown.nsw.gov.au</a></p> <p><b>Payment Methods:</b> You can pay by cash, credit card or cheque Make cheques payable to 'Campbelltown City Council' Do not send cash in the mail Please complete a Credit Card Authorisation if required, which can be downloaded from Council's website: <a href="http://www.campbelltown.nsw.gov.au/formsandpolicies">www.campbelltown.nsw.gov.au/formsandpolicies</a></p>
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