

EXPRESSION OF INTEREST AND CONSENT TO ENTER PROPERTY

Name: _____ Owner: Occupier:

Address of Property:

Contact Telephone Number:

Owner Email:

ACCESS ISSUES: e.g. dogs or locked gates requiring a code.

We request to make our expression of interest for works to be carried out by a Qualified Level 5 Arborist at the property mentioned above. (please provide a description of works)

Attached to this Expression of Interest is the following:

2 x written quotes from a Qualified Level 5 Arborist and deemed dangerous posing a threat to property and / or human life.

Quote # _____
Company: _____

Quote # _____
Company: _____

Photos: (please indicate number of photos supplied) _____

The owner gives consent for the Wollondilly Shire Council Tree Management Officer and those accompanying him/her to enter the property above to conduct an assessment of works

to be carried out as part of The Wollondilly Dangerous Tree Removal Community Grants Program. This may include the taking of photographs.

Signature: _____

Date: _____

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

By completion of this form you may be providing Council with personal information. Council will collect the information only for a lawful purpose directly relation not the function of Council. Information provided to Council may be used in conjunctions with any of Council's business operations. We will take reasonable care not to disclose personal information. Exempt documents may come under the Government Information (Public Access) Act 2009.

FOR OFFICE USE ONLY:

Date EOI received: _____

PARTICULARS OF WORK

Council Tree Management Team assessment of bushfire-generated tree removal

Assessment made to property:

Assessed By: _____

Approved: Not Approved:

Approved By: _____

