# Complete for removal permit applications only

# Owner’s consent

This form must be completed by person listed as the rate payer for the property on our rates system.

*I consent to this application for a Local Law permit and I hereby authorise Council Officers to enter my property at the above address for the purpose of assessing trees described in this application. Bayside City Council and its officers will not be held liable for any property, financial loss or personal injury as a result of the issue or non-issue of a permit in relation to this application.*

Name:

Postal address:

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number:

Signature: