TREE REMOVAL CHECKLIST					Whittlesea	
Name of Subdivision and Stage:			Inspection Date:			
Arborist Name:			Title:			
Company:			Contact No:			
Zool	ogist Name:		Title:			
Company:			Contact No:			
	ncil Representation:					
Anticipated Commencement Date :						
Anticipated Completion Date : TREE REMOVAL CHECKLIST YES			NO N/A			
TREE	EREMOVAL CHECKLIST	YES	NO	N/A		
1	Planning Permit Issued					
2	Endorsed Tree Removal Plan					
3	Trees for Removal Comply with Plan					
4	Inspection by Zoologist Undertaken					
5	Infrastructure in Proximity Identified					
6	Firewood Protection					
7	Check if any heritage and/or significant tree protection?					
8	Stump to be Ground or Pushed	Ground		Pushed		
9	Future Use of Removed Tree	Habitat	Reuse	Mulc	h	
10	General Comments					