



## Safe Removal of Hazardous Trees Application

Information regarding eligibility can be found by calling 1800 180 213 or at:  
[www.dhs.vic.gov.au/bushfireappeal](http://www.dhs.vic.gov.au/bushfireappeal)

Email enquiries:  
[vicbushfireappealfund@dhs.vic.gov.au](mailto:vicbushfireappealfund@dhs.vic.gov.au)

**When completed:**

**Post:** Victorian Bushfire Appeal Fund  
GPO Box 4057  
Melbourne 3001

**Fax:** (03) 9092 1926

**TO PROCEED WITH THIS APPLICATION YOU MUST SIGN THE STATUTORY DECLARATION AND PRIVACY STATEMENT ON PAGES 3 & 4**

**Please tick:**

I can confirm that the fire affected address is a residential property and that all tree(s) claimed under this application have been assessed as hazardous as a result of damage sustained in the 2009 Victorian Bushfires.

**Applicant**

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Name:

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Your fire affected address:

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Your postal address (where different):

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Contact details

Phone number:

Mobile phone number:

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Email address:

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## Completion Checklist

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Please ensure you have provided the following information

- Completed and signed the Statutory Declaration and Privacy Statement. Ensure the Statutory Declaration has been signed by an authorised witness.
- Adequate evidence of ownership of property (rates notice) and supporting identification.
- Evidence of the assessment of the hazardous tree/s on the property, supported by recommendation/s from an arborist that they pose a human safety risk.
- Evidence of costs incurred for the assessment and removal of hazardous tree/s (invoices/receipts for completed work)
- Correct bank account details

Please provide any comments/information that will assist us with the processing of your application (this could include reference to other grants received from the Victorian Bushfire Appeal Fund where you have previously provided identity or ownership documentation and therefore DO NOT need to provide that information again):

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### Applicant's Bank Details

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Account name:

Bank:	Branch:
BSB:	Account number:

## Privacy Statement

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I understand that:

- The Victorian Bushfire Appeal Fund is collecting information in this form for the purpose of determining my eligibility for financial assistance.
- This information will not be used for any other purpose other than determining eligibility and verifying that the information provided is true and correct.
- If I am unable to provide this information upon request, the Fund will be unable to process my application.
- The Fund may need to verify these details, and this may involve contacting health services, councils, insurance companies, employers, and government and non-government departments and agencies.
- I can request this information by contacting the Victorian Bushfire Appeal Fund.
- When I provide the Fund with information about other individuals, the Fund relies on me to make these individuals aware that such information will or may be provided to the Fund as part of the application process.
- The information may be cross-checked with other applications.

I agree with the stated purpose:

YES

NO

Name: .....

Signature: .....

Date:        /        /

# Safe Removal of Hazardous Trees Payment Statutory Declaration

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I, .....  
*[full name]*

of .....  
*[address]*

.....  
*[occupation]*

do solemnly and sincerely declare that:

**I acknowledge that this application is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the penalties of perjury.**

Declared at .....

in the State of Victoria, this .....

day of ..... 2009.

.....  
Signature of person making this declaration  
*[to be signed in front of an authorised witness]*

Before me, .....  
*[signature of authorised witness]*

Name, address and title of authorised witness: .....  
.....  
.....

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