

## AUDIT REPORT (A) - TREE GROUP INSPECTION (FORM 1)

<b>Date of Referral</b>		<b>Form 1 ref. no.</b>	
<b>File Ref.</b>		<b>District</b>	

<b>From:</b>	[Tree Management Office (TMO)] / [Tree Maintenance Department]	<b>To</b>	[Tree Maintenance Department] / [Inspection Officer]
<b>Contact Officer:</b>		<b>Attn.:</b>	
<b>Email</b>		<b>Email:</b>	

*We have identified areas in the subject Form 1 that require your immediate attention and follow up actions (see below for details).*

*Please report actions taken/completion of actions to [tree management department] at \_\_\_\_\_ / TMO at pt@devb.gov.hk within 10 working days from the date of referral.*

### COMMENTS FROM TMO

[ ]	Subject Form 1 is in order.
[ ]	Non-compliance with TRAM Guidelines
[ ]	Location Information*
[ ]	Tree Information – Table A*
[ ]	Tree Information – Table B*
[ ]	Overall Remarks*
[ ]	Attached Information*

\* Sub-section headings of the Tree Group Inspection Form (Form 1) refers.

<input type="checkbox"/> PHOTO REFERENCE	
<i>Please note that these referrals are advisory only. Detailed site visit or specialist advice may be required to determine the appropriate scope of remedial tree work and monitoring work.</i>	

<input type="checkbox"/> LOCATION PLAN

**COMPLETION OF FOLLOW-UP ACTIONS (TREE MAINTENANCE DEPARTMENT)**

*This is to report that the following actions will be taken / have been completed to the identified areas in the subject Form 1.*

<b>Date of return</b>	_____ / _____ / _____		
<b>From</b>		<b>To</b>	
<b>Post</b>		<b>File ref.</b>	
<b>Contact Tel:</b>		<b>Date of Referral</b>	
<b>Email</b>		<b>Email</b>	

**FOLLOW-UP ACTIONS**

<b>Item</b>	<b>Please describe the follow-up actions that will be taken/ have been completed</b>	<b>Date of Completion</b>	<b>Check (✓) if action will be taken</b>
1			
2			
3			
4			

## AUDIT REPORT (B) – INDIVIDUAL TREE RISK ASSESSMENT (FORM 2)

<b>Date of Referral</b>		<b>Form 2 ref. no.</b>	
<b>File Ref.</b>		<b>District</b>	

<b>From:</b>	[Tree Management Office (TMO)] / [Tree Maintenance Department]	<b>To</b>	[Tree Maintenance Department] / [Inspection Officer]
<b>Contact Officer:</b>		<b>Attn.:</b>	
<b>Email</b>		<b>Email</b>	

*We have identified areas in the subject Form 2 that require your immediate attention and follow up actions (see below for details).*

*Please report actions taken/completion of actions to [tree maintenance department] at \_\_\_\_\_ / TMO at pt@devb.gov.hk within 10 working days from the date of referral.*

### COMMENTS FROM TMO

[ ]	Subject Form 2 is in order.
[ ]	Non-compliance with TRAM Guidelines
[ ]	General Information*
[ ]	Tree Information *
[ ]	Location Information*
[ ]	Target Assessment*
[ ]	Site / General Conditions*
[ ]	Crown / Branch / Trunk / Root Condition*
[ ]	Risk Categorisation*
[ ]	Risk Mitigation Measures*
[ ]	Notes, explanations, descriptions and supplementary information*
[ ]	Attached Information*

\* Sub-section headings of the Tree Risk Assessment Form (Form 2) refer.

**PHOTO REFERENCE**

*Please note that these referrals are advisory only. Detailed site visit or specialist advice may be required to determine the appropriate scope of remedial tree work and monitoring work.*


**LOCATION PLAN**

--

**COMPLETION OF FOLLOW-UP ACTIONS**

*This is to report that the following actions will be taken / have been completed to the identified areas in the subject Form 2.*

<b>Date of return</b>	_____ / _____ / _____		
<b>From</b>		<b>To</b>	
<b>Post</b>		<b>File ref.</b>	
<b>Contact Tel.</b>		<b>Date of Referral</b>	
<b>Email</b>		<b>Email</b>	

**FOLLOW-UP ACTIONS**

<b>Item</b>	<b>Please describe the follow-up actions that will be taken/ have been completed</b>	<b>Date of Completion</b>	<b>Check (✓) if action will be taken</b>
1			
2			
3			
4			