

OWNER'S NAME:

MAILING ADDRESS:

PHYSICAL LOCATION (If Different from Mailing Address):

MAP \_\_\_\_\_ LOT

TREE COMPANY/ARBORIST NAME:

TREE COMPANY/ARBORIST ADDRESS:

TREE COMPANY/ARBORIST PHONE NUMBER:

ARBORIST LICENSE #

DISTANCE FROM PROTECTED RESOURCE:

FEET

JUSTIFICATION FOR REMOVAL:

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE:

SIGNATURE OF CEO: \_\_\_\_\_ DATE:

**COMPLETE THE SCALED GRID ON NEXT PAGE TO SHOW TREE(S) LOCATION, TYPE  
AND SIZE (DBH)**

**\*\*\*\*\* ALSO INCLUDE BUILDING LOCATIONS \*\*\*\*\***

**FOR OFFICE USE ONLY:  
REQUIRED PLANTINGS AS CONDITION OF APPROVAL:**

**\*\*\*\*\* ALSO INCLUDE BUILDING LOCATIONS \*\*\*\*\***

[illegible]

