

## **Tree Removal Permit Application Form**

This form shall be submitted with each application for a tree removal permit.

## **CONTACT INFORMATION**

Applicant	Property Owner (if different)
Name	Name
Street Address	Street Address
City, State Zip	City, State Zip
Phone	Phone
Fax	Fax
E-mail	E-mail
Architect (if different)	Land Surveyor (if different)
Name	Name
Street Address	Street Address
City, State Zip	City, State Zip
Phone	Phone
Fax	Fax
E-mail	E-mail

PROPERTY PROFILE				
Property ID #		<del>-</del>		
Site Address				
Legal Description				
	(Subdivision)	(Lot)	(Block)	
Current Zoning				
Proposed Use of the	e Property			
Total Area of Site				
Number of Protecte	ed Trees on Site			
Site Permit Approva				
Building Permit App Date				

Narrative	
Work description	
Map Sheet General Requirements (may be electronic)	
24 in. x 36 in. sheet size  Largest scale possible  Key map  North arrow  Title block with name of applicant and date of submittal  Required Information	
and assigned a reference number  Caliper and common name of all protected tree	easurements from the two nearest property lines
I, (print or type nar information included in my submittal packet is complete	
Signature of Applicant	Date