



| | | | |
|----------------------|--|----------------------|--|
| Location or Address: | | Date: | |
| Start Date: | | End Date: | |
| Tree Species: | | Replacement Species: | |

Additional information:

| |
|--|
| |
| |

TREE INFORMATION

| | | | |
|------------------|--|---|--|
| Species of tree: | | DBH: <small>(Diameter, Breast, Height)</small> | |
| Condition: | | Street name: <small>(Tree is planted on what street)</small> | |

I am the (check one) owner lessee of the property listed above, and the statements and information contained herein are in all respects true, complete and correct to the best of my knowledge and belief.

| | |
|--------------------|-------------------|
| Applicant / Owner: | Owner/Contractor: |
| Address: | Address: |
| City/State/Zip: | City/State/Zip: |
| Email: | Email: |
| Phone: | Phone: |
| Signature: | Signature: |

Staff Use Only

| | | | |
|--|--|--------|--------|
| File #: | Date: | Fee\$: | Staff: |
| Approved: Yes <input type="checkbox"/> No <input type="checkbox"/> | Need Right-of-Way Permit: Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| Staff Notes: | | | |
| | | | |