

# Application for Tree Removal Permit



Name(s) of Applicant:	
Owner(s) of Property:	
Address of Applicant:	
Telephone Number:	
Cell Phone Number:	
Name of Contractor/Person(s) to perform work:	
If a company, Contact Name:	
Telephone number of Contractor:	
Address of Contractor:	
Municipal Address of Property in question for Tree Removal:	
Legal Description of Property:	
Roll # of Property:	
Signature(s) of all owners of Property: By signing here I make application and approve an Officer under By-Law 2011-85 the Tree Preservation By-Law to conduct an inspection of Property at the above location.	(1) _____ (2) _____ (3) _____ (4) _____
Date:	

*For internal use only*

Application Number	
Date Received:	
Date Site Inspection completed:	
Inspected by:	
Conditions for Removal:	
Duration of Work Permit: (maximum 90 days as per section 9.0)	
Renewal Application- Date Received: (submitted 15 days prior to expiration)	
If Granted New Expiration Date: (maximum 90 days as per section 6.0)	
Date permit added to Intranet	