



City of Tigard

COMMUNITY DEVELOPMENT DEPARTMENT

Tree Removal Permit Application

PROPERTY INFORMATION

Address/location: _____

APPLICANT INFORMATION

Name: _____

Address: _____

City/state: _____ Zip: _____

Phone: _____ Email: _____

Owner: _____ Same as applicant

CONTRACTOR/ARBORIST INFORMATION

Name: _____

ISA/CCB#: _____ / _____ Expiration date: _____

Address: _____

City/state: _____ Zip: _____

Phone: _____ Email: _____

Contact person: _____

TREE REMOVAL INFORMATION — to be completed by applicant

Tree species: _____ Num. of trees: _____

Tree location: _____

Reason(s) for Removal

SIMPLE REVIEW PROCESS

- | | |
|--|--|
| <input type="checkbox"/> Tree is a hazard | <input type="checkbox"/> Removal required for approved land use or building permit |
| <input type="checkbox"/> Tree is in an advanced state of decline | <input type="checkbox"/> Tree is dead |
| <input type="checkbox"/> Location conflicts with TSP project | <input type="checkbox"/> Roots are causing damage |
| <input type="checkbox"/> Species is on nuisance tree list | <input type="checkbox"/> Thinning necessary to protect other trees |
| <input type="checkbox"/> Tree is infested with pests or disease | <input type="checkbox"/> Location does not meet planting standards |
| <input type="checkbox"/> Tree has sustained physical damage | <input type="checkbox"/> Recommended by fire marshal |

Continued on reverse - for complex review see page 2

REMOVAL CRITERIA

If you are applying for a simple review, your application must address one or more of the relevant removal criteria for the type of tree you propose to remove. The removal criteria can be found in the [Urban Forestry Manual](#) as follows:

- Street Tree: Section 3
- Median Tree: Section 5
- Sensitive Lands Tree: Section 6
- Development-required Tree: Section 7
- Urban Forestry Fund Tree: Section 8
- Heritage Tree: Section 9
- Documentation (e.g. arborist report, photographs, site plan, tree risk assessment form, etc.) of the conditions described must be included. Tree replacement is required, unless otherwise stated in the approval.

FOR STAFF USE ONLY

REQUIRED SUBMITTAL ELEMENTS

- Owner's Signature/Written Authorization
- Site/PlotPlan (show location & species of each tree, 2 copies)
- Documentation (see removal criteria)
- Filing Fee (complex only)

REVIEW PROCESS

- Simple Complex

Fee (complex only): _____

Case No.: _____

Related Case No.(s): _____

Tax Lot ID: _____

Application accepted:

By: _____ Date: _____

Application determined complete:

By: _____ Date: _____

E:\CURPLN\Masters\Land Use Applications Rev. 12/11/2014

COMPLEX REVIEW PROCESS (check applicable with brief proposal summary)

<input type="checkbox"/> Blocking views or solar access _____ _____ _____ _____	<input type="checkbox"/> Undesirable species _____ _____ _____ _____	<input type="checkbox"/> Other (explain below) _____ _____ _____ _____
---	--	--

APPLICANTS

To consider an application complete, you will need to submit **ALL** of the **REQUIRED SUBMITTAL ELEMENTS** as described on the front of this application in the "Removal Criteria" box. When the owner and the applicant are different people, the applicant must be the purchaser of record or a lessee in possession with written authorization from the owner or an agent of the owner. The owner(s) must sign this application or submit a written authorization with this application.

THE APPLICANT(S) SHALL CERTIFY THAT:

- The above request does not violate any deed restrictions that may be attached to or imposed upon the subject property.
- If the application is granted, the applicant will exercise the rights granted in accordance with the terms and subject to all the conditions and limitations of the approval.
- All of the above statements and the statements in the plot plan, attachments, and exhibits transmitted herewith, are true; and the applicants so acknowledge that any permit issued, based on this application, may be revoked if it is found that any such statements are false.
- The applicant has read the entire contents of the application, including the policies and criteria, and understands the requirements for approving or denying the application.

SIGNATURES of each owner of the subject property required.

_____ Applicant's signature	_____ Print name	_____ Date
_____ Owner's signature	_____ Print name	_____ Date
_____ Owner's signature	_____ Print name	_____ Date
_____ Authorized agent's signature	_____ Print name	_____ Date

TREE REMOVAL PERMIT APPLICATION