



# Heritage Tree Removal Permit Application

This application must be submitted with the Arborist Form

Submit application forms to 701 Laurel Street, Menlo Park, CA 94025

Application No. \_\_\_\_\_

Purpose of application: Removal  Pruning of more than 25%

Permit Fee: \$135.00 (each tree, up to 3 trees); \$90 each additional tree (separate forms required for each tree)

**PLEASE PRINT CLEARLY**

Site Address: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone \_\_\_\_\_ FAX \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

**I (we) hereby agree to hold the City harmless from all costs and expenses, including attorney's fees, incurred by the City, including but not limited to, all cost in the City's defense of its actions in any proceeding brought in any State or Federal Court challenging the City's actions with respect to the proposed tree removal.**

Signature of property owner authorizing access and inspection of tree in his/her absence:

\_\_\_\_\_ Date: \_\_\_\_\_

Type of Tree: \_\_\_\_\_ Location on property: \_\_\_\_\_

Reasons for Request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IF TREE IS DAMAGING STRUCTURE PLEASE ATTACH PHOTOS DEMONSTRATING DAMAGE.**

**Are you considering any construction on your property in the next 12 months?** Yes  No

If yes, please submit additional information describing what type of construction is planned and a site plan.

- Tree may not be removed (or pruned over 25%) unless and until the applicant has received final permission from the City as indicated below.
- The signed permit approval form must be on site and available for inspection while the tree work is being performed.
- A suitable replacement tree, 15 gallon size or larger with a mature height of 30 feet or more, is to be installed in the time frame indicated below.

-----PLEASE DO NOT WRITE BELOW THIS LINE -----

PERMIT APPROVED

PERMIT DENIED

**TIMING OF REMOVAL**

- Upon receipt of this approved permit
- After applying for a Building Permit for associated construction

**TIMING OF REPLANTING**

- Within 30 days of Heritage Tree removal
- Prior to final building inspection of associated construction

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name and title: \_\_\_\_\_



## Arborist Form

Please complete one form for each tree. Mark each tree with colored ribbon or tape prior to our inspection.

**Site Address:**

\_\_\_\_\_

**ARBORIST INFORMATION:**

Name of Certified Arborist \_\_\_\_\_

ISA or ASCA number: \_\_\_\_\_ Menlo Park Business License number: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_ Email: \_\_\_\_\_

**TREE INFORMATION:**

Date of Inspection: \_\_\_\_\_

Common Name: \_\_\_\_\_ Botanical Name: \_\_\_\_\_

Location of Tree: \_\_\_\_\_ Height of Tree: \_\_\_\_\_

Diameter of tree at 54 inches above natural grade: \_\_\_\_\_

Circumference of tree at 54 inches above natural grade \_\_\_\_\_

**Condition of Tree:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If recommending removal or pruning, please list all reasons:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Suggested Replacement Tree:**

\_\_\_\_\_

**Signature of Arborist:** \_\_\_\_\_ **Date:** \_\_\_\_\_