Tree Removal Application

Home Owner(s) Name:				
Property Address:				
Email Address(es):				
PRE-APPROVAL IS REQUIRED FOR THE REMOVAL OF ANY NATIVE OR INDIGEN DIAMETER AT ONE FOOT ABOVE THE NATURAL OF			NCHES OR	MORE IN
Rational for Removal Request / Check All That Apply	Type of		Diameter of Tree(s)	Will Tree be Replaced?
Tree(s) removal is necessary for the construction of a new structure or pool (please submit this application with construction request)				
Tree(s) is diseased and cannot be salvaged				
Tree(s) poses an imminent and significant potential threat to the homeowner's or adjacent property				
Tree(s) removal is required by insurance carrier to continue to provide coverage				
Does the property currently have a tree canopy of less than 50% of the pervious area of the lot?	Please Circle One		Yes or No	
Is the tree(s) located on the actual lot or on the common property contiguous to the road?	guous to Please Circle One		Lot or Common	
Required Supporting Documentation				
 A. Tree survey for lot depicting all trees and structures, tree(s) to be remove B. Certified Tree Arborist Inspection Report C. Insurance Carrier Request, if applicable 	ved and	d new tree	(s) to be p	olanted
Prior to Submitting Your Application Please: Read appropriate section(s) of the Architectural and Landscaping Design Criteria requirements.	a to ens	sure your (understan	iding of
By signing below, I understand this request must conform to the Indian Trails Ar Criteria and I assume full financial responsibility for any damage caused to commeighbors during the completion of this project.				
OWNER DATE: SIGNATURE:				