



**CITY OF WEST SACRAMENTO
TREE PERMIT INFORMATION AND APPLICATION FORM**

Activities requiring a Tree Permit:

\$25 fee (each permit) for businesses

- Cutting down, moving, removing, trimming any branch over 5" in diameter of a **street tree**. (A street tree is any tree growing within a strip 12 ½ feet from the back curb of the street.)
- Cutting down, moving, removing, trimming any branch over 5" in diameter of a **heritage, or landmark tree**. (A "Heritage tree" means any living tree with a trunk circumference of 75" or more or a Native Oak with a trunk circumference of 50" or more; both measured 4'6" from ground level.) The circumference of multi-trunk trees shall be based upon the sum of the circumference of each trunk. A "Landmark tree" is any single or stand of trees of historical significance.
- Perform any work such as trenching, grading, paving, or parking vehicles within the drip line of a heritage, significant or landmark tree.

What to do:

- Fill out the information below only if the tree fits one or more of the criteria listed above. Include fee with permit (businesses only)
- Turn the completed permit and fee into the Department of Parks and Recreation at the address shown on bottom of page. **If you are requesting removal of a protected tree, an arborist report describing the reason for removal must be attached.**
- Within 30 days, the tree will be evaluated by the City Arborist. Owner may be contacted for access to the tree.
- If approved, original permit will be mailed to you, or you may request to pick it up.
- **A copy of the tree permit must be posted in a conspicuous location on the property near the tree during removal or trimming.**

APPLICATION

NAME OF OWNER/APPLICANT: _____ PHONE (Home): _____

MAILING ADDRESS: _____ PHONE (Cell): _____
Street Address City/State Zip

PROPERTY ADDRESS (Location): _____

SPECIES OF TREE(S) _____ TRUNK CIRCUMFERENCE _____ Inches

PROPOSED ACTIVITY: TREE REMOVAL MAJOR PRUNING OTHER

REASON FOR ACTION: _____

FOR REMOVAL OF PROTECTED TREES, WRITTEN EVALUATION OF TREE HEALTH AND STATUS BY AN ISA (International Society of Arboriculture) CERTIFIED ARBORIST MUST BE INCLUDED WITH THIS APPLICATION.

SIGNATURE OF OWNER: _____ DATE: _____

If you have any questions, please contact the Parks and Recreation Department at (916) 617-4620.

FOR CITY USE ONLY:

ARBORIST NAME: _____ DATE: _____

FINDING: _____

CITY MANAGER OR DESIGNEE DETERMINATION: PERMIT APPROVED PERMIT DENIED

AG AND NATURAL RESOURCES SUBCOMMITTEE REVIEW NEEDED? YES NO

NAME/SIGNATURE _____ TITLE: _____ DATE: _____

ATTACH 2 TO 4 PHOTOS AS NEEDED ON SECOND PAGE

Revised 5 - 2007