



TREE REMOVAL PERMIT REQUEST – SINGLE FAMILY RESIDENTIAL

	<p>No person shall cut down, destroy, damage, remove, or poison any native and approved non-native tree 12 inches or larger in Diameter at Breast Height [DBH] within the City without an approved tree removal permit. A tree removal permit may be approved if one or more of the following circumstances exist and is evidenced by a report from an arborist: the tree constitutes a hazard to life or property which cannot be mitigated without removing; the tree is dying or dead so that its restoration to a sound condition is not practical; or it has a disease which can be transmitted to other trees. Tree replacement shall be required pursuant to requirements in Section 12.14 should the tree removal cause the property to fall below minimum requirements.</p>	<p style="text-align: center;">Office Use only</p> <p>Date Received: _____</p> <p>File # TR _____</p> <p><input type="checkbox"/> Approved– No Replacement</p> <p><input type="checkbox"/> Approved– Replacement required</p> <p><input type="checkbox"/> Approved– Conditions</p> <p>Comments: _____</p> <p>Review By: _____ Date: _____</p>	
<p>For any trees within 6' of the seawall, please contact Canal Maintenance, (941)575-5071, prior to removing the tree(s) so that Canal Maintenance can do locates for any tiebacks or dead-men associated with the seawall & seawall cap.</p>			
<p>Application and all pertinent required data (listed below) MUST be submitted with this application</p>			
<p><input type="checkbox"/> Copy of Deed or other evidence of ownership (Tax bill, utility bill, etc)</p> <p><input type="checkbox"/> Photographs of tree to be removed – if removal is due to damage, include picture of damage</p> <p style="color: red;">Note – it is the property owner's responsibility to contact the Homeowner/Master Association</p>			
<p><u>Only the property owner may apply for Tree Removal Permits or Owner must assign authorization to an agent</u></p>			
<p>Applicant Property Owner(s) Information</p>			
Owner(s) Name			
Owner(s) Mailing Address			
City	State	Zip	
Owner(s) Phone	Alt. Phone		
Owner(s) Email address			
# of Tree(s) to be removed in this request	How many Tree(s) will exist in the FRONT of the property after trees ARE REMOVED?		
<p>Tree Location <input type="checkbox"/> Check if same</p>			
Property Address			
City	State	Zip	
<p>Authorized Agent –(to be completed if someone other than the Property Owner is applying for the permit – NOTE: Owner(s) must sign the Authorized AGENT Affidavit)</p>			
Authorized Agent Name		Company Name (if applicable):	
Phone	Address:		
Email	City	State	Zip



CITY OF PUNTA GORDA

URBAN DESIGN
 326 WEST MARION AVENUE
 PUNTA GORDA, FL 33950
 (941) 575-3352
 FAX: (941) 575-3310

Zoning@CityofPuntaGordaFL.com
 UrbanDesign@CityofPuntaGordaFL.com

Tree(s) to be Removed & Reason(s) for Removal (use additional sheet if necessary)

Tree #1	Species/Type		Location:		DBH (inches)	
	Reason for removal					
	Comment					
Tree #2	Species/Type		Location:		DBH (inches)	
	Reason for removal					
	Comment					
Tree #3	Species/Type		Location:		DBH (inches)	
	Reason for removal					
	Comment					

Will Tree(s) Be Replaced: (note: Replacement may be a condition of approval)

Will tree #1 be Replaced		Species/Type	
Location		DBH (inches)	
Will tree #2 be Replaced		Species/Type	
Location		DBH (inches)	
Will tree #3 be Replaced		Species/Type	
Location		DBH (inches)	

Site Plan – Location of trees to be Removed

MUST Include: Existing structures: House, Pool, Driveway, etc.; Location of ALL Existing Tree(s) on property; and Location of Tree(s) to be removed and if applicable location of replacement trees.

X = Tree(s) to be Removed
 O = Existing Tree(s) on Property
 0 = Location of Replacement Tree

