

Building and Permitting 1975 Lakeside Pkwy Suite 350

Tucker, GA 30084 Phone: 678-597-9040 **FOR OFFICE USE ONLY - PERMIT #:** 

## **Tree Removal Permit Application**

Email:SMaalouf@tuckerga.gov; landdevelopment@tuckerga.gov Website: www.tuckerga.gov

PROPERTY AND OWNER INFORMATION				
Address:				Zip:
Owner Name:				
Phone: Email:				
APPLICANT INFORMATION (If different from owner)				
Applicant:   Homeowner   Arborist   Contractor				
Name:	С	Company Name:		
Phone:		Email:		
TREE(S) TO BE REMOVED				
Diame (Should Species measured above gr		oe t 4.5'	Reason for Proposed Tree Removal:	
Tree #1:				
Tree #2:				
Tree #3:				
Tree #4:				
Tree #5:				
Required – Photograph of each tree attached? ☐ Yes ☐ No  Required – Sketch of property showing building and trees to be removed attached? ☐ Yes ☐ No  Required – Arborist letter for dead, dying, diseased and/or insect infested tree attached? ☐ Yes ☐ No ☐ N/A  Is there a stream in proximity to the property? ☐ Yes ☐ No  If yes, you may be required to submit a survey illustrating proposed trees are not in the City's 75 foot Stream Buffer				
Lot Size:			Number of trees remaining:	
APPLICANT AGREEMENT AND SIGNATURE				
** I understand that the City of Tucker's Tree Protection Ordinance requires that I maintain canopy coverage consistent with Chapter 14, Section 14-39. I further attest that this documentation and statements included in this application are true and correct. If any information is found to be false or misrepresented, the permit will be deemed invalid.				
Signature:			Da	ate: