



Application for Tree Permit (PGMC 12-16)

CITY OF PACIFIC GROVE
PUBLIC WORKS DEPARTMENT

Applicant Information

Property Owner:	Agent name (if applicable):
Property Address:	Agent Address:
Mailing Address:	
Homeowner Phone#:	Company Representative:
Contact phone #:	

I _____ authorize (agent's name) _____ to represent me in the application and processing of this permit.

Signature of owner _____ Date _____

Tree #	Specie	Requested Action: Prune, Trim, Remove
1		
2		
3		
4		

Reason for Request – Please provide brief descriptions. Details may follow in the report. Please check here if you are using the City arborist/forester for your report.

The following conditions must be met.

1. NO WORK IS PERMITTED until you have picked up an approved permit for tree work. The permit must be posted at the job site.
2. PLEASE BE ACCURATE AND COMPLETE. The City's decision is based on the information submitted on and with this application.
3. The city arborist must be contacted 48 hours before work is to commence.
4. All trees to be removed must be marked with a bright ribbon around the trunk of the tree. Any tree removed must be replaced with two trees of a species approved by the City arborist.
5. A site plan must accompany the application showing the location of the trees to be worked on and the location of the trees to be replanted.
6. All tree work activity shall comply with the provisions of the PGMC 12.16, including, but not limited to, the posting and notice requirements contained therein.
7. Pruning must be done in accordance with standards set forth by the International Society of Arboriculture. Heading cuts are not allowed unless approved by the city's arborist.
8. The city's arborist shall have final decision on species for replanting.
9. Permits are valid for 60 days. An extension for an additional 60 days may be requested before the first 60 days expire.
10. TREE REPLACEMENT MUST OCCUR WITHIN 60 DAYS OF REMOVAL. THE ACCOMPANYING FORM MUST BE SIGNED AND RETURNED BY THE PROPERTY OWNER OR THEIR AGENT WITHIN 10 DAYS AFTER THE PLANTING IS COMPLETED.

I have read and agree with the conditions of this application.

I request to pay in lieu fees in place of replanting ___ trees. (Request will be approved or denied by the City Arborist)

Signature of owner or agent: _____ Date: _____

Application fee: \$ _____ Received by: _____ Date: _____