

EXEMPTION VERIFICATION FORM FOR TREE TRIMMING OR REMOVAL IN HISTORIC DISTRICTS

1. Site Address: _____
2. Applicant Name: _____
Applicant Address: _____
STREET CITY STATE ZIP
Applicant Telephone Number: _____
3. Contractor Name: _____
Contractor Address _____
STREET CITY STATE ZIP
Contractor Telephone Number: _____ Business License #: _____
4. Project Description: _____

FOR CITY USE ONLY

The project described is exempt from the Certificate of Appropriateness approval process because it falls under the category checked below:

- ☐ a) Trimming of a tree(s) that could threaten life, property, or the provision of essential services such as electrical power or communications
- ☐ b) Removal of a tree(s) that could threaten life, property, or the provision of essential services such as electrical power or communications
- ☐ c) Trimming of a tree(s) that blocks visibility
- ☐ d) Removal of any dead or dying tree(s), identified as such by an ISA arborist
- ☐ e) Removal of a tree(s) that blocks visibility and cannot be trimmed to allow clear sight lines

Approved by _____
(Approved work is specifically limited to the project description on this form. Applicant should keep a copy of the permit on-site and be able to produce it upon request of any City Official).

Date _____

Expiration Date _____
(30 days from project approval date unless otherwise specified)