



**TREE REMOVAL APPLICATION**

**\*\*If your tree removal is related to property development or a remodel, submit your request through the Planning Department at 919 Palm Street as part of your Planning Application.\*\***

**IMPORTANT:** A tree removal application will only be considered if accompanied by a **\*sketch/map\*** showing the street, structure(s) location and location of all trees proposed for removal. Please draw on the back of this form or fax on a separate sheet of paper, along with your application.

**PLEASE NOTE:** If your tree is approved for removal and posted, please call the office at the end of your posting period to arrange to pick up your permit. **The permit fee is \$81** payable when you pick up your permit (cash or check payable to City of San Luis Obispo).

**\*\*Please mark the tree/s proposed to be removed with a large X with duct tape.**

**\*\*Tree removal applications must be received by the second Monday of the month to be considered for the meeting on the fourth Monday of the month. PLEASE FILL OUT COMPLETELY.**

Address of tree(s) to be removed: \_\_\_\_\_  
Nearest cross street: \_\_\_\_\_ Dog in yard? Yes  No

Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Owner's Mailing Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Applicant (if other than owner): \_\_\_\_\_ Telephone: \_\_\_\_\_  
Applicant's mailing address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Tree species (Common names): \_\_\_\_\_

Reasons for requesting removal: \_\_\_\_\_  
\_\_\_\_\_

**Replacement tree planting proposed (REQUIRED):**

- \* Application will be considered only if entirely filled out and signed by owner. If consideration of this application goes to Tree Committee, you or your agent are required to attend the meeting and will be notified.
- \* If lane closure is required to perform the tree removal work, an encroachment permit must be obtained from the City Public Works Department at 919 Palm Street.
- \* Tree Removal permit is valid for 6 months
- \* Any required "replacement trees" must be installed within 45 days after removal.

**MAIL OR FAX completed form to: City Arborist, 25 Prado Rd., San Luis Obispo, CA 93401, Phone: 781-7220 Fax: 542-9868**

Owner: \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant: \_\_\_\_\_ Date: \_\_\_\_\_