

Department of Transportation
URBAN FORESTRY SERVICES
5730 24th Street Building 12 A Sacramento, California 95822
Phone (916) 264-5011 or 311
urbanforestry@cityofsacramento.org
Application fee: \$50.00

TREE PERMIT APPLICATION

Applicant Information

Name: _____ Phone () _____ Fax () _____

Address: _____ Contractor License # _____

Property Owner Information (if different):

Name: _____ Phone () _____ Fax () _____

Address: _____

Owner/Agent Statement

Property Owner Consent— I am the legal owner of record of the land specified in this application or am authorized and empowered to act as an agent on behalf of the owner of record on all matters relating to this application. I declare that the foregoing is true and correct and accept that false or inaccurate owner authorization may invalidate or delay action on this application.

Signature: _____ Date: _____

Project Information:

Residential Development Commercial Development Owner-Occupant

Address: _____ Other permits applied for? Yes No

List other permits that you have applied for: _____

APN: _____ Related Project Number: _____

Number of Trees: _____ Tree Species and Diameter: _____

(Please attach other documents such as arborist reports and site plans)

Type of permit requested: Prune or Removal of a Street Tree Heritage Tree or Parking Lot Tree

Reason for permit: _____

Applicant Signature: _____ Date: _____

*****OFFICE USE ONLY*****

Receipt Number _____ Arborist Report attached? Yes No Site plans attached? Yes No

Permit: GRANTED DENIED Permit Number: _____

City Arborist comments or conditions: _____

Authorized Signature: _____ Date: _____

