



Town of Burlington

TREE REMOVAL PERMIT APPLICATION

Address of Project: _____ **Date:** _____

Property Owner (print clearly): _____
(Contact person for information and questions)

Property Address: _____

Contact Info: **Phone:** _____ **Email:** _____

Description of work (list location(s) of trees; tie ribbon on tree(s) for field identification; include description of replacements if applicable):

(For example: tree removal, grinding stumps, landscaping, new plantings, proposed grading, etc.)

Name, Address and Telephone number of Certified Arborist, Landscape Architect (If Applicable):

Additional drawings and information may be necessary to document your proposal.

☐ Sketch included

☐ Trees marked w/ ribbon

For Official Use Only

Received by: _____

Received Date: _____

Public Hearing date: _____

☐ Approved

☐ Approved w/ conditions

☐ Denied

Tree Warden