



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