



City of Forest Grove

TREE REMOVAL PERMIT/PRUNING PERMIT

Permit Number: TREE-15-_____

Applicant:

Phone:

Site Address:

Mailing Address:

Tree Service/Individuals:

Phone:

ISA or ASCA Number:

Expiration Date:

Tree Condition/Reason for Work:

Tree Location Sketch and Notes:

Property Owners/Representative Signature: _____ Date: _____

CALL BEFORE YOU DIG 1-800-332-2344 IT'S THE LAW

FOR CITY USE ONLY – DO NOT WRITE BELOW THIS LINE

Site Conditions/Requirements:

Receipt # N/A Check # N/A

- 1. Stumps shall be removed or ground to two inches below grade.***
- 2. Work must be completed within 60 days of permit approval.***
- 3. Contact the Planning Division after the work is complete.***

Replacement Trees Required:

Selection:

- 1. Minimum 2-inch caliper, balled and burlapped, 6-foot branch height.***
- 2. Selection to be approved by the City.***
- 3. Maintain a distance of at least six feet from water meter.***
- 4. Other:***

To be installed by: Owner/Applicant

Tree Planting Verification

Date:

Power Lines in Work Area

Light and Power Department Approval

Date:

Street Closure/Traffic Control

Police Department Approval

Date:

CD Department Approval/Denial By:

Date: