



Land Use & Environmental Services Division (850) 891-7100  
 Location: 435 N. Macomb Street  
 Mail: 300 S. Adams Street, Box B-28, Tallahassee, Florida 32301-1731  
 Fax: (850) 891-7184 Florida Relay Service TDD: 711

## TREE REMOVAL PERMIT APPLICATION

**Property Owner's Information:**

Name: \_\_\_\_\_

Mail Address: \_\_\_\_\_

\_\_\_\_\_ City State Zip

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Agent's Information:**

Name: \_\_\_\_\_

Mail Address: \_\_\_\_\_

\_\_\_\_\_ City State Zip

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Project Information:**

Parcel I.D.#: \_\_\_\_\_

Site Address or Location: \_\_\_\_\_

LUCC # (s): \_\_\_\_\_

Project Type: \_\_\_\_\_ (1=Single-Family, 2=Multi-Family, 3=Commercial, 4=Industrial )

Tree Removal Type: \_\_\_\_\_ (1=Patriarch or exceptional specimen over 36" DBH,  
 2=Canopy Road (within 100 feet of center line),  
 3=Wetland tree(s) of any size, or  
 4=Tree(s) over 18" diameter or 4" in lot perimeter zone)

Compensation Type: \_\_\_\_\_ (1=Fee-in-Lieu-Of, 2=Tree Replanting\*, or 3=Trees Preserved on Site)  
***\*If Compensation Type is 2-Tree Replanting, then size, quantity, species type, and location of tree(s) to be replanted shall be shown on the site map.***

Is this application being submitted as a response to enforcement action relating to development activities without a permit?

\_\_\_\_ Yes \_\_\_\_ No If yes, attach the "Notice of Violation"

Quantity of Trees being removed: \_\_\_\_\_ (***must not exceed 10***)

Description and diameter of tree(s) being removed and reason(s) for each removal:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ACKNOWLEDGEMENT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with the all applicable laws, construction and zoning.

\_\_\_\_\_  
 Signature of Owner Date

**Submittal Requirements:**

- \_\_\_\_ Completed Application Form (*original*)
- \_\_\_\_ Completed & Notarized Owners Affidavit (*original*)
- \_\_\_\_ Location map with major cross streets and the exact location of trees on site.
- \_\_\_\_ Color documents should also be submitted in electronic form in one of the following formats: .tif; .pdf; .jpeg; or .bmp.
- \_\_\_\_ \$273.00 Application Fee. Make check payable to City of Tallahassee.

Official actions relating to this permit will be directed to the applicant and the applicant's designated agent, if any. All applications must be accompanied by sufficient documentation to facilitate determination of whether the proposed development activity conforms with the City of Tallahassee Land Development Code.

**TO BE COMPLETED BY REVIEWER**

**Reviewer's Notes:**

Required Compensation for Removal:

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**Special Conditions:**

Special Conditions apply to the Permit:

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**Permit Is:**     Approved     Denied

\_\_\_\_\_  
Reviewer's Signature

\_\_\_\_\_  
Date