

VILLAGE OF CANAL WINCHESTER

36 SOUTH HIGH STREET
CANAL WINCHESTER, OHIO 43110

PLANNING AND ZONING DEPARTMENT
PH 614.837.7501 FAX 614.837.0145

TREE & WOODLAND REMOVAL and WORK PERMIT

Rev. 5/15/2007

Property Owner's Name _____ Address _____ Daytime Phone _____

Applicant's Name _____ Address _____ Daytime Phone _____
(if applicable)

Address of Subject Property _____

Subdivision Name & Lot No. (if applicable) _____

If WOODLAND, include a detailed drawing to scale of the proposed project.

Are the trees greater than four (4) inches in diameter (dbh)? ___ Yes ___ No

Attach three (3) copies of a tree survey prepared by a certified arborist or professional forester. Additional information to determine compliance with Chapter 1191 may be required by the Urban Forester.

I certify that the information provided with this application is correct and accurate to the best of my ability.

Property Owner's Signature _____

Date _____

DO NOT WRITE BELOW THIS LINE

Date Received: ___ / ___ / _____ Fee: \$ _____ Historic District: ___ Yes ___ No
Paid Preservation Area: ___ Yes ___ No

Tracking No.: _____

Date of Action: ___ / ___ / _____

Expiration Date: ___ / ___ / _____

Application ___ No
Approved: ___ Yes
___ Yes, with conditions

Urban Forester