Tree Permit Application Form

This Application Form is to be completed in full by a Wilmington resident who wishes to plant, remove, or alter a tree that is located on the City right-of-way, adjacent to their property.

Once the Application Form has been completed by the resident, please give it to the Code Enforcement/Building and Zoning Department so that it can be date stamped and submitted to the Wilmington Tree Commission for processing. The resident will be notified (in a timely manner), by the Wilmington Tree Commission whether the application has been approved or denied.

Last Name: __________________________ First Name: __________________________

Address: __________________________ Phone: (__________)

The Applicant wishes to perform the following action on the City Right of Way:

☐ Plant a tree at the Applicant's cost (according to the attached "Approved City Tree Listing and Planting Plan").
  Indicate the tree species to be planted: __________________________

☐ Remove a tree at the Applicant's cost.
  Indicate the reason for removal: __________________________
  Indicate the licensed and insured company that will be removing the tree: __________________________

☐ Prune branches at the Applicant's cost.
  Indicate the reason for pruning: __________________________
  Indicate the number of branches to be removed: __________________________
  Indicate the licensed and insured company with certified arborist that will be removing the tree: __________________________

(NOTE: Liability will be the Applicant's responsibility.)

Please use the back of this form to draw the location of the work to be performed on the City Right of Way that borders your property.

This section is to be completed by the Wilmington Tree Commission

Date Application was received: ________________ Is the Application Approved or Denied? _________

If denied, reason: __________________________

Will O.U.P.S. be contacted 1-800-362-2764 to mark the area? If so when: __________________________

Signatures:
  President of the Wilmington Tree Commission __________________________
  Secretary of the Wilmington Tree Commission __________________________

Date the Applicant was notified of the status of their request: __________________________
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Draw the outline of the City Right of Way where the work is to be performed, including street names, buildings, trees, obstacles and dimensions.

Once application form has been completed, please give it to the Secretary of the Service Department: 69 N. South Street, Wilmington, OH 45177