

# **Tree Removal Permit Application**

Fee: \$40

www.oaklandfl.gov				
Owner Name:				
Owner Authorization Signature (Or attach notarized power of attorney):				
Owner Address:				
Property Owner Contact Information				
Phone:				
Email:				
Arborist, Tree Service Company:				
Address:				
Phone:				
Email:				
Contractor Business License Number:				

If a tree is removed because it presents a threat to the foundation of a property, please provide a letter from a civil engineer describing the threat, and a letter from an arborist stating that it is unfeasible or impossible to use an alternative method (cutting roots, etc) to save the tree.

I certify that the information and exhibits submitted are correct to the best of my knowledge, and that I am acting with the knowledge and consent of all parties involved in the project. I understand there may be additional fees required to complete the permit review process.

**Applicant Signature and Date** 

	Draw all Buildings and Trees on Property	
	Label Tree(s) to be removed	
	Provide 2 Photos of the tree(s)	
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# Description of Tree(s) to be removed:

### Tree 1

**Species** 

Size (Diameter)

Reason for Removal:

### Tree 2

Species

Size (Diameter)

Reason for Removal:

### Tree 3

Species

Size (Diameter)

Reason for Removal:

### Tree 4

Species

Size (Diameter)

Reason for Removal:

# (For Staff Use)

Approved		
<b>Conditional Approval</b>		
Denied		
Comments:		