



614 MAIN ST. WINDERMERE, FL 34786  
OFFICE: (407) 876-2563 FAX: (407) 876-0103

# TREE REMOVAL PERMIT

DATE APPLIED: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_, WINDERMERE, FL 34786

PROPERTY OWNER(S): \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ SECONDARY PHONE: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

CONTRACTOR NAME / COMPANY: \_\_\_\_\_

CONTRACTOR PHONE: \_\_\_\_\_ CONTRACTOR EMAIL: \_\_\_\_\_

Number of Tree(s) to be Removed:	Type of Tree(s):	Location of Tree(s) and Identifying Marking:	Diameter of Tree(s)

REASON FOR REMOVAL:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## OFFICE USE ONLY:

DATE OF INSPECTION: \_\_\_\_\_ BY: \_\_\_\_\_ APPROVED: YES / NO / PENDING: \_\_\_\_\_

ARBORIST REPORT REQUIRED: YES / NO      MITIGATION FEE: YES / NO      AMOUNT: \$ \_\_\_\_\_

ADDITIONAL REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PERMIT FEE \$15 [DATE PAID: \_\_\_\_\_ TYPE: \_\_\_\_\_]      MITIGATION FEE \$ \_\_\_\_\_ [DATE PAID: \_\_\_\_\_ TYPE: \_\_\_\_\_]

PHOTO RECEIVED       SITE MAP / DRAWING RECEIVED

APPROVED DATE: \_\_\_\_\_ NAME: \_\_\_\_\_ PERMIT: TREE # \_\_\_\_\_