

Street Tree Replacement and Planting Permit Application

City of Fairview

1300 NE Village St., Fairview, Or 97024

Public Works – Permits Desk 503 674-6206

Application No.:	Permit No.: ROW
Date Received:	Expire date:
Date Issued:	Issued By:
Fee:	\$25.00 per tree not associated with sidewalk repair permit

REASON FOR TREE REPLACEMENT (Please Check)

- HEALTH (Report from professional required)
- SIDEWALK ISSUES
- OTHER (Public Facility Conflict)
- HAZARD (specify)

Applicant must provide a copy of the tree replacement receipt or schedule a final inspection in order to close this permit. Failure to replant may result in code enforcement (abatement, fines.) Receipts may be mailed to address above.

SITE ADDRESS:			
NUMBER OF TREES TO BE REMOVED:	TREE SPECIES:	TREE SIZE (dbh*):	
NUMBER OF TREES TO BE PLANTED:	TREE SPECIES:	TREE SIZE (dbh*): 1.5"	
PROPERTY OWNER:		PHONE NUMBER:	
ADDRESS:	CITY:	STATE:	ZIP:
CONTRACTOR:		PHONE NUMBER:	
ADDRESS:	CITY:	STATE:	ZIP:
CCB NUMBER:	CITY / METRO LICENCESE NUMBER:		
Terms <ul style="list-style-type: none"> • Refer to the Sidewalk Maintenance Program Handbook for the approved street tree(s) • Attach a map, plan, or drawing of the proposed work • Attach a report if citing tree health as reason for replacement • Attach a ribbon to the tree(s) you wish to remove • Applicant shall call for final inspection or submit receipt showing completed work <p>**APPLICANT MUST CALL 811 TO HAVE UNDERGROUND UTILITIES MARKED**</p> <p><i>I agree to comply with the City of Fairview Code Sections 12.25, 19.100, 19.106, and 19.163 regarding tree removal and all relevant sections of the Sidewalk Maintenance Program Handbook. Failure to adhere to any portion of the above cited guidelines during or after tree removal may be cause for permit revocation and/or citation for code violation.</i></p> <p><i>I hereby acknowledge that the information provided on this form is correct and that all work will be in conformance with approved plans.</i></p>			
APPLICANT SIGNATURE (S)			Date

City of Fairview Approved By: _____ Date: _____