

Number _____

TOWNSHIP OF PARSIPPANY-TROY HILLS

APPLICATION FOR REMOVAL OF TREES

The applicant must submit a sketch plat of the subject building lot showing the location, number, approximate size, and type of trees located thereon. There shall also be shown the proposed location of buildings and appurtenant structures and such areas where changes in existing grades are required.

- 1) OWNER'S NAME _____ TELE # _____
- 2) ADDRESS _____
- 3) AGENT'S NAME _____
- 4) ADDRESS _____
- 5) BLOCK _____ LOT _____
- 6) ADDRESS OF PROPERTY _____
(If other than #2)
- 7) NUMBER OF TREES TO BE REMOVED _____
(Or area to be cleared)
- 8) SPECIES OF TREES TO BE REMOVED _____
- 9) REASON FOR REQUEST _____
- 10) EQUIPMENT TO BE USED _____

SIGNATURE OF OWNER _____

PERMISSION GRANTED _____ DATE _____

Township Forester

WITH EXCEPTIONS *(If applicable)* _____

IF YOU HAVE ANY QUESTIONS, CALL 973-263-7254

FAX 973-331-3940