



TOWN of GREENBURGH
Department of Community Development and Conservation
 177 Hillside Avenue, Greenburgh, New York 10607

Phone: (914) 989-1530

Website: <http://www.greenburghny.com>

TREE REMOVAL PERMIT APPLICATION

USE FOR APPLICATIONS TO REMOVE TEN OR LESS TREES ON A RESIDENTIAL PROPERTY IF THE REMOVAL IS NOT IN CONNECTION WITH A RESIDENTIAL DEVELOPMENT PROJECT

Paul J. Feiner
Supervisor

Garrett Duquesne, AICP
Commissioner

Aaron Schmidt, ISA
Deputy Commissioner

INCOMPLETE SUBMISSIONS WILL BE REJECTED AND RETURNED

Application Fee:	\$25 per tree for up to 2 trees per calendar year \$50 per tree otherwise	\$	Permit Number:	
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Individual Submitting Application

Name: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ - _____ Cell: _____ - _____ Email: _____

Contractor/ Licensed Professional Tree Care Company Information

Name: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ - _____ Cell: _____ - _____ Email: _____

Westchester County Home Improvement Lic. No: _____

ISA Holder's Name & License No.: _____

Subject Property

Address of subject property: _____

Property Use: Single-Family Multi-Family

Tax Parcel ID#: _____ Total site area (sq. ft. or acreage): _____

Proposed Action

1) Total number of regulated trees proposed to be removed from the site: _____

Relationship to other actions

1) Is this request in conjunction with any other administrative or land-use board application? Yes No

If Yes, please provide application type and #: _____

Additional Submission Requirements

- 1) Tax Map from Town website showing subject property and all adjoining and directly across the street properties.
- 2) Names and addresses of all adjoining and directly across the street property owners.
- 3) A sketch plan showing the approximate location of trees to be removed. If the Forestry Officer determines that a Site Plan (as defined in § 260-2 of the Town Code) is required, applicant will be notified in writing.
- 4) A written letter outlining all proposed landscaping. If the Forestry Officer determines that a Landscape Plan (pursuant to § 260-8I of the Town Code) is required, applicant will be notified in writing.
- 5) Certificate(s) of Insurance of Contractor/Licensed Professional Tree Care Company.
- 6) Such other information and/or documentation the Approval Authority may require.

NOTE: The submission of this Tree Removal Permit Form does not confer any rights, privileges, licenses, permits or other entitlement upon the applicant and does not relieve the applicant from compliance with all other applicable laws, rules and regulations of the Town of Greenburgh.

Final Approval Authority:	<input type="checkbox"/> Forestry Officer <input type="checkbox"/> Historic Board <input type="checkbox"/> Planning Board (Subdivision Applications)	Date of Submission:	
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Methodology used: i-Tree Design <input type="checkbox"/> National Tree Benefits Calculator <input type="checkbox"/> Other <input type="checkbox"/> (please specify) _____	Permit Number:	
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Summary of Trees Proposed for Removal (Page __ of __)

Tree ID #	Latin Name Common Name	DBH or Circumference <small>(Use D or C to indicate which)</small>	Reason Code	In Wetland, Watercourse or Buffer? Y/N	On an Excessively Steep Slope? Y/N	Designated Tree? Y/N	In Designated Buffer or Conservation Easement Area? Y/N	Gallons of SW Absorption	Pounds of CO2 Removal

Total number of trees proposed for removal on the property: _____	Total:	Total:
	Replacement Requirement %	
	Required Replacement Values:	

- | | |
|--|--|
| <u>Reason Code</u>
1) Hazard
2) Diseased or Infected
3) Remove to Grade
4) In Driveway or Service Line
5) Proximity to Structure | 6) Within Construction/Development Limit of Disturbance
7) Good Forestry Practice
8) Landscape Modification
9) Other (Please specify on separate sheet) |
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Methodology used:

i-Tree Design National Tree Benefits Calculator

Other (please specify) _____

Permit Number:

Summary of Trees Proposed for Planting (Page __ of __)

Tree ID #	Latin Name Common Name	DBH	Gallons of SW Absorption	Pounds of CO2 Removal
Total:			Total:	

If applicant is the owner of the premises, a copy of a New York State Driver's License with a name matching that of the property owner may be substituted for a notarized affidavit.

AFFIDAVIT

STATE OF NEW YORK)
)SS
COUNTY OF WESTCHESTER)

_____ being duly sworn, deposes
and says:

that _____ is the owner in fee of the premises to which this application applies and has received a true and correct complete copy of the application; that I am duly authorized to make this application; and that the statements contained here are true to the best of my knowledge and belief. I have received a copy of Tree Ordinance. I further state that I understand that the cutting down or removal of trees is extremely dangerous and that it should be done by competent tree personnel taking proper safety precautions.

SIGNATURE OF APPLICANT

SIGNATURE OF OWNER(S)*
(if other than applicant)

SWORN TO BEFORE ME THIS

_____ DAY OF _____

(NOTARY PUBLIC, WESTCHESTER COUNTY)

***NOTE: If the applicant is not the owner of premises, written permission of the owner must be affixed to this application. Owner's signature may be provided on a separate affidavit.**