



APPLICATION
FOR
TREE SUBSIDY PROGRAM

APPLICANT INFORMATION:

LOCATION OF PROPERTY: _____

OWNER: _____

ADDRESS: _____ PHONE: _____

City/State: _____ Zip: _____

WORK DONE BY:

CONTRACTOR OWNER OTHER SPECIFY: _____

REASON FOR TREE REMOVAL:

DISEASED DAMAGED HAZARDOUS CONDITION OTHER

If OTHER Explain: _____

Signature of OWNER or AGENT

Date

For City Staff:

FINAL SUBSIDY CALCULATION

TREE REMOVAL COST: _____

LESS OWNER'S INITIAL SHARE: **- \$200.00**

OWNERS SHARE: _____

CITY SHARE: _____

(As per Ordinance 2424)

(\$500 maximum)

OTHER COMMENTS: _____

EVALUATOR

PUBLIC WORKS DIRECTOR