

## Inspections Department One Rev. Dr. Martin Luther King, Jr. Drive Willingboro, N.J. 08046-2853

Phone 609-877-2200 ext. 1214 Fax 609-877-1278

## TREE REMOVAL PERMIT APPLICATION

Date:	Block	Lot(s)	\$25.00 FEE	
Applicant		Address		
Telephone No				
Property Owner (if differe	ent from applican	t)		
Address				
City, State, Zip		Telephone	e No	
Contractor Name				
Address				
City, State, Zip				
Phone No	1	NJ Board of Tree Expert R	Registration #	
Number of tree(s) to be re Reason for removal  Where will removed tree(  PERMIT IS NOT N  TREES TO BE REN INSPECTOR CAN  TREE STUMPS M  IF YOU ARE USIN PREVENT INFEST  I certify that I am	emoved	ES THAT ARE LESS THAN 6 E MARKED WITH A RIBBO UAL INSPECTION PRIOR T MOVED. NEITHER TRASH S FIREWOOD, IT MUST BE e or authorized by the own ents are willfully false, I	poor good hazardous 6 INCHES IN DIAMETER. N OR EQUIVALENT MARKIN TO APPROVAL. I CONTRACTOR NOR TOWNS E ELEVATED AT LEAST SIX (6)	IG SO THE
	/Homeowner			
OFFICE USE ONLY:  Public Works Approval: _			proved { } Denied	
rubiic works Approval: _		Date:		

Check #: \_\_\_\_\_ Cash: \_\_\_\_ CC # \_\_\_\_ Receipt #: \_\_\_\_\_