

APPLICATION FOR "TREES ON PUBLIC PROPERTY" ORDINANCE

Applicant Information
Name:
Company/Organization:
Address:
Phone Number:
Email:
Type of Tree Work (Check all that apply.)
Tree Removal
Excavation or trenching within 10 feet of the trunk of a public tree (Explain Preservation Plan)
Ground disturbance within the critical root cone of a public tree (Explain Preservation Plan)
Tree Pruning (ISA Certified Arborist Required)
Spray (ISA Certified Arborist Required)
Fertilize (ISA Certified Arborist Required)
Tree Planting
Other Activity:
Please provide your reasoning, description of work, and preservation details:
Tree(s) or Planting Location (if applicable)
Address/Location:
Description of Planting Location (includes species, cultivar, location):

Work Dates and Agreement	
Please note that a 5 (five) days' notice must be gi	iven to the Urban Forester or designated official for an
inspection of completed work.	
Start Date:	Completion Date:
The applicant shall perform all work in accordance Knoxville Ordinance sections 14-51 through 14-64	
I certify under penalty of law that I have examined believe the information to be true and accurate.	and am familiar with the information submitted and
Sign:	Date:
This permit must be signed by applicant no less th	nan 72 hours in advance of work being started.
Below portion to be completed by City o	f Knoxville staff.
Site Plans 1 Protect designated trees with fence 2 Install tree trunk protection 3 Root protection required 4 Root prune required 5 Prune damaged roots within 24 hours 6 Water designated trees 7 Prune tree canopy 8 Clean up site 9 Tree mitigation is required 10 Other:	S
Urban Forester Signature:	Date:
Permit Number:	

Permit is not valid until Urban Forester or designated official signs the application.