



Palmetto Hall Architectural Review Board  
**Palmetto Hall Tree Removal Application**

Application Date: \_\_\_\_\_ Desired Start Date: \_\_\_\_\_ Projected Completion Date: \_\_\_\_\_

**Tree Mitigation: The ARB may require mitigation for tree removal if approved. Complete form completely and legibly.**

**Owner Info:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Contractor Info:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**APPLICATIONS FOR TREE REMOVAL ARE REVIEWED ONCE A WEEK.**

**PLEASE ALLOW SUFFICIENT TIME FOR REVIEW/APPROVAL PROCESS FOR PERMITTING.**

- To request the removal of a tree, it should be dead, diseased, dying, hazardous, or leaning over a structure.
- *PLEASE CLEARLY MARK THE TREE(S) YOU WANT REMOVED WITH TAPE OR RIBBON*
- Indicate the location of tree(s) in relation to house and the type of tree(s):

<u>Location</u>	<u>Number</u>	<u>Type or Species</u>	<u>Diameter at chest height</u>
Front	_____	_____	_____
Back of house	_____	_____	_____
Left of house	_____	_____	_____
Right of house	_____	_____	_____

Reason for Tree Removal: \_\_\_\_\_

\_\_\_\_\_ by initialing here, I understand that all tree stumps must be ground down below grade, and that tree mitigation may be required as determined by ARB Inspector. I understand mitigation work must be completed within 90 days unless approved otherwise by the POA. Failure to grind down stump(s) and/or failure to mitigate as agreed upon will result in fines and a forfeiture of the mitigation deposit.

**Submitted by:** (circle one)      Owner      Contractor      Management Company

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_