



**STREET TREE WORK APPLICATION
PERMIT
FORESTRY DIVISION**

Address of Property: _____

PROPERTY OWNER

Name: _____ Home Phone: _____

Address: _____

_____ Fax/Email: _____

APPLICANT/CONTACT PERSON

Name: _____ Phone: _____

Address: _____

_____ Fax/Email: _____

Please check all that apply:

Planting_____ Pruning_____ Removal_____ Stump Removal_____ Construction_____ Other_____

Type of tree: _____ **Diameter of tree:** _____
(If replacement, please ask for a list of acceptable tree species)

Reason for above activity:

Other Maintenance (Fertilizer, pest control, etc...Please explain):

(SIGNATURE) Circle: Owner/Contact

(DATE)

I acknowledge that the information this application is correct to the best of my knowledge.

<u>For office use only</u>			
_____ Denied	_____	_____ City Forester	_____ Date
_____ Approved	Permit #: _____		
_____ Approved with the following conditions: _____			

All of the work referred to above shall be performed without cost to the City of Novi. The holder of this permit agrees not to hold the City of Novi, or any employees thereof, responsible for any liability by the accident to person or property, however caused, through exercise of this permit.

* Before you dig, call MISS DIG.

**45175 West 10 Mile Road
Novi, MI 48375
(248) 347-0400**