



To be filled out **COMPLETELY** by applicant

**Date:** \_\_\_\_\_

I/We hereby make application for a Tree Cutting or Removal Permit to permit the proposed tree cutting and removal as described below on the following parcel:

**Project Address:** \_\_\_\_\_

**Legal Description** (available at City Hall): **Lot:** \_\_\_\_\_ **Section:** \_\_\_\_\_ **Plan No.:** \_\_\_\_\_

**Type, Height and Diameter of tree(s) to be removed:**

(Diameter measured at 1.4m (4ft 7in) above ground, straight across the trunk of the tree. Trees 20 cm cal/8" or greater require a valid tree permit prior to removal.)

	Type/Species of Tree	Diameter (cm)	Approximate Height (m)
Tree #1			
Tree #2			
Tree #3			

List attached for additional trees

**Reason for tree removal (Note: trees are only approved for removal if they are dead, dying, hazardous, or have unresolvable conflicts with buildings, structures or utilities):**

\_\_\_\_\_

**Documents Included:** Please check all that apply.

- Air Photo with trees marked (supplied by staff)     
  Photo included     
  Construction on neighbouring property (site plan and survey required; builder should be applicant)
- Arborist's Report     
  Letter of Authorization

Please ensure there is access to the yard to inspect (i.e. dogs are inside, gates are unlocked). Please initial in box to indicate you have read and understand this.

**PLEASE PRINT CLEARLY**

**All Registered Owners:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address** (if different than above): \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**Signature of All Registered Owners:** \_\_\_\_\_

If required:

**Authorized Agent of Owner:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Completed Tree Removal application forms and supporting materials can be sent to Richmond City Hall, Attn: Permits via courier, Canada Post or emailed to [permitsinfo@richmond.ca](mailto:permitsinfo@richmond.ca).

For Office Use	
Application Fee:	Receipt No.:
Permit No.:	Letter of Authorization: