



DATE RECEIVED: \_\_\_\_\_

NO. \_\_\_\_\_

# APPLICATION FOR TREE REMOVAL PERMIT

Construction Department  
182 Union Avenue  
Bloomingtondale, NJ 07403  
973-838-7995

-- PRINT OR TYPE --

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Address where tree(s) to be removed: \_\_\_\_\_

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

Tree(s) to be removed by:  New Jersey licensed tree service provider:  
Tree Service \_\_\_\_\_  
 Property Owner; OR Business Registration Number (NJTC#) \_\_\_\_\_  
LTE, LTCO, or ISA Certified Arborist (CA) # \_\_\_\_\_

PERMIT APPLICATION MUST BE RECEIVED **AT LEAST TEN (10) BUSINESS DAYS** PRIOR TO PROPOSED REMOVAL DATE

**\*Identify trees proposed for removal by tying string or tape around trunk; do not permanently mark trees\***

Proposed removal date: \_\_\_\_\_

Total number of trees proposed for removal: \_\_\_\_\_

1) Does this property have any pending Planning Board or Board of Health applications? \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

- Permit application does not constitute approval; do not schedule tree removal until application has been approved
- The submission of a tree removal and planting replacement plan may be required
- Replacement alternatives may be permitted at Borough determination (*tree replacement in separate area approved by the municipality OR \$150.00 fee per tree removed*)
- Approved permits are valid for six (6) months from the authorization date written below

----- \*\* **DO NOT WRITE BELOW THIS LINE** \*\* -----

**Permit Fee \$50.00** -  Cash;  Check # \_\_\_\_\_ Received; by staff member: \_\_\_\_\_

**Tree Removal Permit:**      **APPROVED**                      **NOT APPROVED**

Reason for denial: \_\_\_\_\_

Plant replacement tree(s):  **Not Required**;  **Required**

**Municipal Approval:**

**Date:**