



Community Services Department
Urban Forestry Division
2001 East Street
Woodland, CA 95776
530-661-2000

Application for permit to prune/remove City maintained trees at home owners cost.

1. Name of Property Owner

2. Daytime Telephone Number

3. Mailing Address (Please include street and city)

4. Location of Tree(s)

5. Type (species)

6. Number of Trees

7. Tree Type

Reason for Pruning/Removal

NO HEADING/STUBBING

_____ Thinning/shaping

_____ Remove mistletoe (dead wood)

_____ Remove/replace with weight reduction (Safety prune)

_____ Remove (Drop crutching for height reduction)

_____ Clear utility lines (house drop)

_____ Dying/Poor Structure

_____ Other _____

_____ Signature

_____ Date

Name of Tree Trimming Services _____ Phone _____

Address _____

Business License # _____

ISA Certification # _____

Please allow 5 working days for processing of permit applications

Permit _____ Approved

_____ Denied

Date _____

Special Conditions: _____

ALL TRIMMING SHALL BE DONE TO CURRENT INTERNATIONAL SOCIETY OF ARBORICULTURE (ISA) STANDARDS

_____ Signature

_____ Date

PERMIT EXPIRES 30 DAYS FROM THE ABOVE DATE OF APPROVAL