

BOROUGH OF NEW MILFORD
930 River Road, New Milford, NJ 07646
(201) 967-8172 fax (201) 967-1741

TREE REMOVAL APPLICATION & MANAGEMENT PLAN

\$25.00 INITIAL PERMIT FEE AND \$5.00 FOR EACH ADDITIONAL TREE.

Heritage tree(s), specimen tree(s) or right of way tree shall **NOT** be removed without the prior and express written approval of the Commission or Code Enforcement Official. The property owner, or a person licensed by the Borough may only remove any tree subject to the provisions of Ordinance No. 2018:22.

Date _____ Corner Property Yes [] No []

Owner _____

Address _____

City, State, Zip _____

Telephone No. _____

Property Owner (if different from applicant) _____

Homeowner cutting down tree must provide homeowner insurance

Contractor Name _____

Address _____

City, State, Zip _____

Phone No. _____ Registration # LTE/LTCO _____

IF CRANE BEING USED (show location of crane on diagram)

Crane Contractor _____

Crane Phone Number _____

Crane Insurance _____

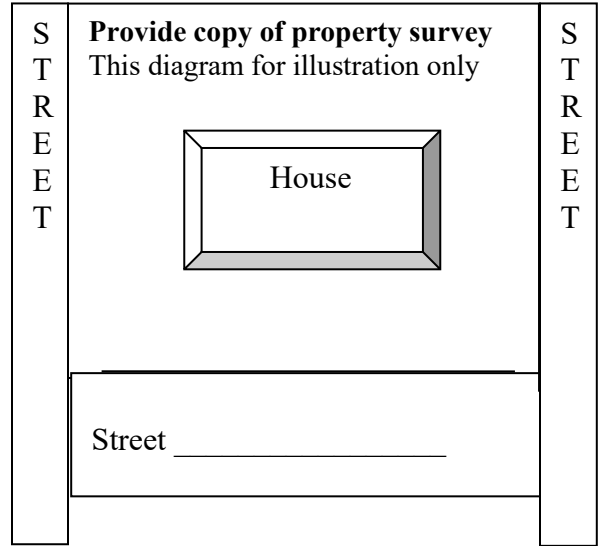
Number of tree(s) to be removed _____ trimmed _____ Species of tree(s) _____

Approximate size of tree(s) _____

Diameter of the tree at its breast height of three (3) inches or more _____

Reason for removal _____

Signature of applicant(s)/homeowner _____



Applicant must provide copy of contractor's business registration, and LTE or LTCO, and if using a crane, a copy of the crane operators license

Shade Tree Commission Signature/Zoning Official Signature

***** ONLY FILL OUT IF CUTTING TREES FOR BOARD APPLICATIONS *****

Applicant must submit a property survey with the location of the tree(s)

Impact of removal such as screening & privacy _____

Is a crane being used for removal? () Yes () No - Comment _____

Description of project: () thinning () selective cutting ()
clear cutting () aesthetic improvement cut () other _____

Explain existing landscape conditions _____

Proposed new trees or landscaping or screening () Yes Amount _____ () No

Specific proposals for replanting or reforestation _____

Are there wetlands or streams in the immediate area () Yes Show location of streets () No Explain

Are there proposed roads, lots in the immediate area () Yes Show location(s) () No
Explain _____

Show location of slopes greater than 10% where any tree removal is proposed
Explain _____

Any other information _____

➤ Signature of Applicant(s)/
Homeowner _____

DATE APPROVED _____

DATE DENIED _____

PERMIT NO. _____

Block/Lot _____

Shade Tree Commission Remarks _____

Shade Tree Commission Signature/Zoning Official Signature
