Schedule "B"

Application for Permit

Pursuant to Section 14

App	lica	tion/	Fί	le	No.	

Town of View RoyalApplication for Permit – *Tree Removal/Alteration*

Please complete the following to help us process your application. This includes the written information on the front of this form and a **sketch of the property** where indicated. (If more room is required, please attach additional pages to this application form).

,	
Site Address:	
Name of Applicant:	
Phone Number of Applicant:	Email
Address of Applicant:	
Name of Owner (if different from above):	
Phone Number of Owner:	Email
Address of Owner:	
Nature of proposed construction, if applicable:	
Related Permit(s) if applicable:	
Type and number of tree(s) proposed to be removed:	
Diameter of tree(s) proposed to be removed (determined by	dividing the circumforance of the trunk
measured at 1.2 m above the ground, by 3.142):	dividing the chedimerence of the trunk,
Type of proposed replacement trees:	

Reason	for removal (please circle the one item below that best describes your situation)
1.	Too close to foundation
2.	Too close to garage
3.	Dead or dying
4.	Unattractive
5.	Too large for size of property
6.	Blocking sunlight
7.	Attracting wildlife
8.	Causing sidewalk problems
9.	Leaves causing problems
10.	Blocking site access
11.	Affecting house value
12.	Hazardous
13.	Interfering with utility wires
14.	Interfering with water/sewer/drains
15.	Interfering with view
16.	Other
Suppler	mentary documents may be required in support of this application and may include:
•	a copy of a State of Title Certificate, or a copy of a Certificate of Indefeasible Title, dated no more than thirty (30) days prior to submission of the application
•	a report prepared by an I.S.A. Certified Arborist, at the applicant's expense.
associa with the Town o kind, in includin	ner or owner's agent, I have verified that the information contained within this document and ited applications and plans is correct. I acknowledge that responsibility for bylaw compliance rests cowner and the owner's employees, agents and contractors. I will indemnify and save harmless the if View Royal, its officials, employees and agents against claims, liabilities and expenses of every respect of anything done or not done pursuant to this application or fact sheet or ensuing permit, g negligence and/or failure to observe all bylaws, conditions, acts or regulations.
Signed	at View Royal, BC this day of year

Signature of Applicant

Signature of Owner

Property Sketch				
Site Address:				
Your property sketch must include:				

- The dimensions of the property and location of the street(s)
- The location of the house and other buildings on the property
- The exact location and type of trees that you wish to remove
- The planting location and type of replacement tree
- The location and types of all other trees on the property
- The type and location of proposed construction activities, including accesses, if applicable

To ensure an accurate on-site inspection, please mark with string, ribbon or flag tape all trees that you propose to remove/alter.

FOR OFFICE USE ONLY

	Application approved Application denied	
	Arborist report required	
	Title certificate required	
	Removal/Alteration	
	Pruning	
	Replanting Required	
	Removal/Alteration Complete	
	Signature of Official:	
	Date:	
	Replanting Complete	
	Signature of Official:	
	Date:	
Notes:		
Forms	and required documents duly completed, received.	
Signatu	ure of Official:	
Date: _		