City of Escalon Tree Removal/Planting Application

Property Address: _____

Name:
Cell Phone #Other #Other # SECTION 2: TREE REMOVAL INFORMATION () N/A – I am not removing any trees (skip to section 3) Date for Tree(s) Removal: # of Trees to Be Removed: Species of Trees to be Removed: Size of Trees to be Removed (circle one): Small <30 FT
SECTION 2: TREE REMOVAL INFORMATION () N/A – I am not removing any trees (skip to section 3) Date for Tree(s) Removal:# of Trees to Be Removed: Species of Trees to be Removed:
() N/A – I am not removing any trees (skip to section 3) Date for Tree(s) Removal: # of Trees to Be Removed: Species of Trees to be Removed: Size of Trees to be Removed (circle one): Small <30 FT Medium 30-50 FT Large >50 FT Reason for Tree Removal: Will Trees be Replaced (circle one): YES NO SECTION 3: TREE PLANTING INFORMATION () N/A – I am not planting any trees
Date for Tree(s) Removal: # of Trees to Be Removed: Species of Trees to be Removed:
Species of Trees to be Removed:
Size of Trees to be Removed (circle one): Small <30 FT
Reason for Tree Removal:
Will Trees be Replaced (circle one): YES NO SECTION 3: TREE PLANTING INFORMATION () N/A – I am not planting any trees
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Date for Tree(s) Planting: Number of Trees to Be Planted:
Species of Trees to be Planted:
Size of Trees to be Planted (circle): 5 Gallon 15 Gallon 24" Box 36" Box 48" Box 60" Box & Up
Reason for Tree Planting:
*If Planting New Trees (Not Replacing Removed Trees), You Must Provide A Site Plan With Measurements On The Specific Location Of The Proposed Trees, Distances Between Trees, And Clearances From Sidewalk, Streets, Driveways, Street Lights, Traffic Signs, Utility Facilities.
Date: Signature of applicant:
FOR CITY USE ONLY
() Approved () Approved with Below Conditions () Denied BY:
Conditions: DATE:

Return to: 2060 McHenry Ave. Escalon CA 95320 * Fax to: 209.691.7439 * email: dtrejo@cityofescalon.org Please include application and site plan if applicable. There is no fee for this process.