30 DAY TREE REMOVAL PERMIT APPLICATION

TREES PROPOSED FOR REMOVAL - Up to 5 per parcel

<table>
<thead>
<tr>
<th>DATE</th>
<th>TR No. (assigned by County)</th>
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APPLICANT/CONTRACTOR

OWNER

PROPERTY STREET

PHONE

PHONE

CITY

ZIP

Property Appraiser's ID No.

SEC

TWP

RNG

SUB

BLK

LOT

Subdivision

PROPERTY ACREAGE

No. of Existing Trees on Lot

NUMBER OF TREES REMOVED

TREE TYPE

DIAMETER: 5" DBH and LARGER

REASON FOR REMOVAL

SAFETY

PROXIMITY TO STRUCTURE (ft)

THINNING Yes or No

CONDITION OF TREE

PERMIT REQUIREMENTS IF APPROVED:

- Re-planting any location on your property
- No re-planting required would over crowd due to existing number of trees on parcel
- No re-planting required

** NOTICE OF DEED RESTRICTIONS **:
The property for which this permit is requested might be subject to deed restrictions. As owner or as the authorized agent for the owner you are responsible for determining, prior to tree removal, whether the requested tree removal is a violation of deed restrictions.

I HEREBY CERTIFY, AFFIRM OR SWEAR that I am the owner or the authorized agent for the owner of the property for which this permit is requested.
The information provided herein is true and correct to the best of my knowledge. I release Pasco County from all responsibility for damages incurred as a result of the tree removal activity.

The foregoing instrument was acknowledged before me this ______ day of ______________________, 20_____ by

(name of person acknowledging) who is ________ personally known to me or has produced ___________ (type) as identification.

Notary Public (State of Florida at Large)

PERMIT APPROVED

PERMIT DISAPPROVED

OWNER OR AUTHORIZED AGENT

PRINT NAME

-NO REFUNDS-

Fee can be paid by Cash, Check, Money Order, or Credit Card

CODE ENFORCEMENT OFFICER - Badge # or ZONING & INTAKE

wpdata/zn/treepermitAPPL

Rev. 11/10/16