



Borough of Phoenixville
 140 Church Street
 Phoenixville, PA 19460
 Phone (610) 933-8801
www.phoenixville.org

| | |
|------------------|-------|
| Permit #: | _____ |
| Permit Fee: | N/A |
| Application Fee: | N/A |
| PA Surcharge | N/A |
| Inspection Fee: | N/A |
| Total: | N/A |

Borough Regulated Tree Permit Application

Pruning Removal

Property Information: (Please Print)

Property Address: _____
 Owner Name: _____
 Owner Address: _____
 Phone: _____ Cell: _____ Email: _____
 Tax Parcel Number: _____ Zoning District: _____

Trees to Be Reviewed:

Number: _____ Species/Type: _____ DBH: _____
 Number: _____ Species/Type: _____ DBH: _____
 Number: _____ Species/Type: _____ DBH: _____

DBH = Diameter at 4 1/2 Feet Above Ground

Reason(s) for Work to be Performed:

| | | |
|--|--|--|
| <input type="checkbox"/> dead limbs | <input type="checkbox"/> building conflict | Comments: _____ _____ _____ _____ |
| <input type="checkbox"/> decay/rot | <input type="checkbox"/> structural (damage to tree) | |
| <input type="checkbox"/> pathogen (bacteria/virus) | <input type="checkbox"/> utilities conflict | |
| <input type="checkbox"/> insect infestation | <input type="checkbox"/> other (specify) | |
| <input type="checkbox"/> disease (fungal) | | |

Please note that all removal permits for trees in the easement are required to grind the remaining stump. All removal permits where the stump remaining lies on the owner's side of a sidewalk shall not have this requirement.

I hereby certify that I am the owner of record and agree to conform to all applicable laws of this jurisdiction regarding tree pruning. I agree to hold harmless the Borough of Phoenixville, its agents, officers and employees for any damage or injury caused by reason of planting, placement, maintenance or removal of Borough Regulated Trees. The owner(s) of any adjacent properties shall be solely liable for any damages. I understand that any pruning must be performed under the direction of an insured, ISA Certified Arborist in accordance with ANSI A300 standards for arboriculture. Tree work shall comply with all Borough Codes and the recommendations of the Phoenixville Tree Advisory Commission. I have examined this application, its requirements and to my knowledge and belief, is a true, correct and complete application.

Owner's Signature: _____ Date: _____

I would like: To be called to pick up the permit upon approval To have the permit mailed