



Fee: **No Charge**

## PROTECTED TREE REMOVAL PERMIT

***Include an 8 1/2" x 11" copy of the approved Tree Conservation Plan (TCP) for the property.***

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

### Property Information

Location Address \_\_\_\_\_ Subdivision Name \_\_\_\_\_

Label = Identification of Protected Tree(s) to be removed as identified on the approved TPC:

Label: \_\_\_\_\_ Diameter at Breast Height (DBH): \_\_\_\_\_ Species: \_\_\_\_\_

Label: \_\_\_\_\_ Diameter at Breast Height (DBH): \_\_\_\_\_ Species: \_\_\_\_\_

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Label: \_\_\_\_\_ Diameter at Breast Height (DBH): \_\_\_\_\_ Species: \_\_\_\_\_

Label: \_\_\_\_\_ Diameter at Breast Height (DBH): \_\_\_\_\_ Species: \_\_\_\_\_

Additional list of Protected Trees Attached: **Yes** or **No**

TCP Approval Date by P&Z: \_\_\_\_\_

Is the property within the Historic Preservation Overlay (HPO): **Yes** or **No**

**I hereby certify that the foregoing is correct and that said work will be done in compliance with the information herein set forth and in compliance with Article 13 of the City of Granbury Zoning Ordinance regulating tree removal. I hereby certify the permit and the Tree Conservation Plan (TCP) will be on-site for the contractors and inspectors review.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Date \_\_\_\_\_

Approved By \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**An approved Protected Tree Removal Permit shall be valid for 30 days from the date of approval, after which, such permit shall be deemed null and void. A Protected Tree shall not be removed or relocated without an approved and active Protected Tree Removal Permit.**