



Received Date:

Mailing Address: 455 Wallace Street
Nanaimo BC V9R 5J6

Office: 411 Dunsmuir Street
Telephone: (250) 755-4460, local 4357
Fax: (250) 755-4439

Tree Removal Permit Application No.

APPLICATION FOR TREE REMOVAL PERMIT

1. Location of Proposed Activity

Legal Description (Lot, Block, Section, Range, District, Plan):						
Lot	Blk	Sec	Rge	Dist	Plan	

Street Address:

2. Owner/Applicant Information

Owner

Name(s):

Mailing Address:

Telephone Number(s):	Fax Number:	Email Address:
----------------------	-------------	----------------

Applicant

(If Applicant is not the registered owner, an Appointment of Agent form must accompany this application)

Name(s):

Mailing Address:

Telephone Number(s):	Fax Number:	Email Address:
----------------------	-------------	----------------

3. Purpose of Application and Supporting Permits/Approvals Required

Purpose of Tree Removal Application (ie. why trees are to be removed/proposed project):

Have you or do you intend to apply for any other permits or approvals with the City of Nanaimo or the BC Ministry of Water, Land and Air Protection in conjunction with this Application: If yes, describe:

List relevant files (write down any applicable file numbers):
<input type="checkbox"/> Development Permit Application (DP): <input type="checkbox"/> Rezoning Application (RA):
<input type="checkbox"/> Subdivision Application (SUB): <input type="checkbox"/> Building Permit Application (BP):

Site Plan

4. Site Description

Topography:

Soils and morphology:

Water (lakes, streams, creeks):

Wildlife habitat (eg. nesting trees, deer):

Natural features/visual values:

Vegetation (overstory/understory – size, species, density):

Significant trees on site (trees of Heritage, Wildlife, or Landmark value):		
Species	Number	Diameter Range (centimeters)

5. Tree Removal/Retention Proposal

Provide information for total project, as well as each phase of phased projects, and indicating current phase being developed. All sizes to be recorded in hectares:
Size of parcel:
Size of existing treed area:
Size of proposed Parkland Dedication, if applicable:
Size of proposed Tree Protection Zone, excluding Parkland Dedication:
Size of proposed tree clearing area:

6. Replacement of Trees

Identify required replacement plantings for trees which will be removed:

Species	Number	Diameter (centimetres) of Deciduous Stock or Height (meters) of Coniferous Stock

Indicate location of plantings on a map:
(attach map)

Specify maintenance and tending practices for replacement plantings:

7. Owner's/Applicant's Acknowledgement

The above descriptions and methods proposed in this application are correct to my knowledge.

_____ Signature _____ Print Name _____ Date

THIS SECTION FOR OFFICE USE ONLY

FEES PAYABLE:

Application Fee: \$50.00

Tree Cutting Fee (# of trees x \$10.00 or size of tree cutting area in ha. x \$500.00/ha.):

Significant Tree Cutting (\$100 for each significant tree) _____

TOTAL FEE (maximum \$2,500.00): _____

OR

No Fees Applicable (✓)

Reason: _____

Notes: _____

Patrick McIntosh
Urban Forest Coordinator

Tel: 250-755-4460, local 4357 Fax: 250-755-4439
Office: 411 Dunsmuir Street Mailing Address: 455 Wallace St Nanaimo BC V9R 5J6