



**TOWNSHIP OF WYCKOFF  
TREE PERMIT APPLICATION**

**Property Address:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Lot:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Registered Tree Contractor Information**

**Company Name:** \_\_\_\_\_ **Wyckoff Registration #:** \_\_\_\_\_

**Qualified Trees:** A property survey, sketch or site plan with each tree location marked with an "X" is required. If preparing a sketch, also include the street, house and driveway in relation to the tree(s).

<b>Species</b>	<b>Diameter at Breast Height (DBH)</b>	<b>Reason for Removal</b>	<b>Location on Property</b>

Number of Qualified Trees\* \_\_\_\_\_

\*Subject to Verification by Township Inspector

Minus Number of Hazard Trees \_\_\_\_\_

**NUMBER OF QUALIFIED TREES TO BE REMOVED** \_\_\_\_\_ **X \$50 =** \_\_\_\_\_ **PERMIT FEE**

**EACH QUALIFIED TREE SHALL BE MARKED WITH A 1" WIDE RED, YELLOW, OR BLUE RIBBON AT 4-1/2' HIGH.**

*One tree per each Qualified Tree that is removed must be replaced; however, no more than one (1) tree per 5,000 sq. feet of unimproved lot coverage and as verified by authorized Township personnel shall be replanted per permit issued. All replacement trees must be planted within one year of tree removal. Replacement trees shall be planted in the next planting season – after September 1 or before June 1.*

*Replacement deciduous trees shall have a DBH (diameter at breast height) of not less than a two-inch caliper.*

*Replacement coniferous trees shall have a height of at least 5 feet.*

**Number of trees which require replacement** \_\_\_\_\_

**Are you going to replace all the removed trees?** YES \_\_\_\_\_ NO \_\_\_\_\_

**Fee in lieu of replacement** \_\_\_\_\_ **x \$500 =** \_\_\_\_\_ **REPLACEMENT FEE**

**PROPERTY OWNER'S ACKNOWLEDGEMENT OF REPLACEMENT POLICY:**

**Signature of Property Owner** \_\_\_\_\_ **Printed Name** \_\_\_\_\_ **Date** \_\_\_\_\_

*For Office Use Only*

**Approved by** \_\_\_\_\_ **Date** \_\_\_\_\_ **PERMIT #:** \_\_\_\_\_

**Special Conditions:**

**Payment Information:** Check # \_\_\_\_\_ **Date** \_\_\_\_\_ **Amount** \_\_\_\_\_



## TREE REMOVAL APPLICATION MAP

# of trees \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

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(Sketch should include house, driveway and location of trees to be removed.)