



**Planning & Building Department**

401 Grove Street  
 Healdsburg, CA 95448  
 707.431.3346  
 www.cityofhealdsburg.org

**Heritage Tree Removal Permit Application**

*Last Updated: November 18, 2019*

*Please print or type*

**Tree information**

Address \_\_\_\_\_ APN \_\_\_\_\_

Common name	Botanical name	Diameter 2 feet above ground	Reason for removal
1.			
2.			
3.			

Arborist report attached  yes  no

Location map attached  yes  no

**Applicant** \_\_\_\_\_ **Property owner** \_\_\_\_\_

Mailing address \_\_\_\_\_ Mailing address \_\_\_\_\_

City, state, zip \_\_\_\_\_ City, state, zip \_\_\_\_\_

Telephone no. \_\_\_\_\_ Telephone no. \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

**Arborist** \_\_\_\_\_ **Other contact** \_\_\_\_\_

Mailing address \_\_\_\_\_ Mailing address \_\_\_\_\_

City, state, zip \_\_\_\_\_ City, state, zip \_\_\_\_\_

Telephone no. \_\_\_\_\_ Telephone no. \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

***Important Notice***

*An Encroachment Permit is required, and must be obtained from the Healdsburg Public Works Department, prior to any work performed within the public right-of-way (street, sidewalk, etc.)*

**For City use only**

Address _____	APN _____	
_____	_____	_____
Staff action	Reviewer	Date
_____	_____	_____
Posting date	10-day period end	Permit no.

Conditions of Approval:

---

---

---

---

---

---

---

---

---

---

---

---