

APPLICATION FOR A TREE PERMIT

Pursuant to the City of Kingston Tree By-Law (By-Law No. 2007-170)

OFFICE USE ONLY

Tree Permit Application File No.: _____

Date Received: _____

This application must be completed in full.

Please Note:

It is recommended that prior to completing the application, the Applicant review the Tree By-Law and consult with the appropriate municipal staff.

1. Property Owner

Name: _____

Address: _____

Telephone Number: _____

2. Authorized Agent (if applicable)

Name: _____

Address: _____

Telephone Number: _____

3. Person or Company Retained to Undertake the Work

Name: _____

Address: _____

Telephone Number: _____

4. Forestry Consultant (Certified Arborist, Certified Tree Marker, Registered Professional Forester)

Name: _____

Address: _____

Telephone Number: _____

5. Subject Property

Municipal Address: _____

Legal Description (if available): _____

If Applicable, Lot _____ Concession _____

Roll Number of Subject Property (if available): _____

6. Description of Work to be Undertaken

Size of Area to be Cut (hectares): _____

Anticipated Starting Date: Day _____ Month _____ Year _____
Anticipated End Date: Day _____ Month _____ Year _____

Number of Trees to be Removed: _____

Reason(s) for Removal:

Development

Harvesting

Other _____

Number of Trees to be Preserved: _____

Preservation Measures to be used for Retained Trees _____

Number of Trees to be Replanted: _____

7. Other Applications

Please list any additional applications affecting the subject property (e.g. Planning Approvals; Building Permit, etc.)

8. Cultural and Natural Heritage Features

Please list any cultural or natural heritage features (e.g. archaeological resources, wetland, stream, woodland, etc.) located on or adjacent to the subject property?

9. Required Attachments

(a) The application fee, as outlined in Schedule 'B' of the Tree By-Law.

YES NO

(b) A map of the subject property, showing the boundary of the lands, any abutting roads, any other abutting lands owned by the Applicant, and the trees to be removed and retained.

YES NO

10. Additional Attachments (if required)

- (a) An Arborist's Report prepared by a Qualified Forestry Consultant in accordance with the City of Kingston's Guidelines for an Arborist's Report. YES NO
- (b) A Tree Preservation and Protection Plan prepared by a Qualified Forestry Consultant in accordance with the City of Kingston's Guidelines for Tree Preservation and Protection. YES NO

11. Supporting Documents (if required)

- (a) The written authorization of the Owner consenting to the application, where the Applicant is not the Owner. YES NO
- (b) The written consent from the adjacent property owner, where the base of a tree to be injured or destroyed straddles the property line. YES NO

This application has been submitted in accordance with the provisions of the Tree By-law (By-Law No. 2007-170) of the City of Kingston. The contents of this application are accurate and correct to the best of my knowledge.

DATED AT Kingston, Ontario this _____ day of _____, 20____

Signature of Owner / Agent

Signature of Forestry Consultant

Please note: The submission of a Tree Permit Application constitutes permission for municipal staff to enter and inspect lands upon which the tree(s) is located. The Tree Inspector will review the Tree Permit Application, conduct a site visit, and may consult with the Applicant, if necessary.

Submit the application to the Director of Planning & Development

Mailing Address: City of Kingston
Planning & Development Department
216 Ontario Street
KINGSTON, ON K7L 2Z3

Personal Information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, Section 32, and may be used to enforce By-Law No. 2007-170.