

# TREE PERMIT APPLICATION

**TOWN OF LONGBOAT KEY PZB**  
 501 Bay Isles Rd. (mail: 501 Bay Isles Rd)  
 Longboat Key, FL 34228  
 (941) 316-1966 Fax: (941) 316-1970

APPLC.# \_\_\_\_\_ TP.# \_\_\_\_\_  
 PERMIT FEE \$ \_\_\_\_\_  
 Receipt # \_\_\_\_\_ Date: \_\_\_\_\_

**SITE:(job location)**=====

1. complex/project \_\_\_\_\_
2. street#/name \_\_\_\_\_

**PROPERTY OWNER:**=====

1. owner name \_\_\_\_\_
2. street#/name \_\_\_\_\_
3. city/state/zip \_\_\_\_\_
4. phone ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

**APPLICANT-CONTRACTOR:**=====

1. business name \_\_\_\_\_ Same as property owner: \_\_\_\_\_
2. business owner \_\_\_\_\_
3. owner address \_\_\_\_\_
4. city/state/zip \_\_\_\_\_
5. phone ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

**WORK:**=====

<b>TREES TO BE REMOVED:</b>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>
TOTAL NUMBER	_____	_____	_____	_____	_____	_____
TREES TO BE REMOVED	_____	_____	_____	_____	_____	_____
<b>TREES TO BE MOVED:</b>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>
TOTAL NUMBER	_____	_____	_____	_____	_____	_____
TREES TO BE MOVED	_____	_____	_____	_____	_____	_____
<b>TREES TO BE TRIMMED:</b>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>
TOTAL NUMBER	_____	_____	_____	_____	_____	_____
TREES TO BE TRIMMED	_____	_____	_____	_____	_____	_____
<b>TREES TO BE REPLACED:</b>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>	<u>NO.</u>	<u>SPECIES</u>
TOTAL NUMBER	_____	_____	_____	_____	_____	_____
TREES TO BE REPLACED	_____	_____	_____	_____	_____	_____

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**EXPLAIN IN DETAIL THE REASON WHY ABOVE TREE WORK SHOULD BE DONE:**

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**SITE PLAN ATTACHMENT:** Applicant must submit a site plan/sketch indicating location, size and species of existing and proposed trees and indicating which are to be trimmed, removed, moved and replaced.

Tree plan/sketch is attached YES ( ) NO ( )

**PETITION FOR REVIEW:=====**

I the undersigned have read and am knowledgeable of the Town's Code of Ordinances Chapter 98 as amended and shall assume total responsibility for any violations as determined by the Town.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**OFFICE USE ONLY:=====**

- ( ) Application is approved in its entirety
- ( ) Application is approved with the following restrictions:

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TWO INSPECTIONS required @ \$10.00 each	= \$ 20.00
Base permitting fee	= \$ <u>6.25</u>
<b>TOTAL FEE DUE</b>	<b>= \$ <u>26.25</u></b>

\_\_\_\_\_  
Signature of Town Manager or Designee

\_\_\_\_\_  
Date