

Borough of Demarest
Tree Removal Permit Application

Phone: (201) 768-0167, ext. 130 Email: lcampbell@demarestnj.gov

INSTRUCTIONS:

1. Submit the following to the Secretary of the Demarest Shade Tree Commission:
 - a. Original and 2 copies of completed, signed application
 - b. Original and 2 copies of survey or map drawn to scale showing the location of all Covered Trees to be removed, including the species and DBH (Diameter at Breast Height), as well as the location of any existing or proposed buildings, driveways or other structures (you may use your survey, marked to show the trees to be removed)
 - i. If tree replacement is required under the Ordinance (refer to the application form for details), add to the survey or map the location of all replacement trees to be planted, including the species and DBH
2. Wrap each tree proposed to be removed with a red ribbon at 4-1/2 feet above the ground
3. Pay the application fee by check payable to the Borough of Demarest, as follows:

| Number of Covered Trees to Be Removed | Application Fee |
|---|-----------------|
| 1 to 3 | \$100.00 |
| 4 to 6 | \$125.00 |
| 7 or more but excluding Clear-Cutting | \$250.00 |
| Clear-Cutting that qualifies for an exemption | \$2,500.00 |

Clear-Cutting: the removal or Constructive Removal in any two contiguous calendar years of 25% of the Covered Trees on any lot(s) in the Borough (and not in the Borough right-of-way) as depicted on the Borough's tax map or on or in any approved subdivision plan or deed

Covered Trees: any existing trees with a Diameter at Breast Height ("DBH") of six (6) inches or more

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A. PROPERTY:

Street Address _____

Tax Block & Lot _____

B. TREE CARE OPERATOR (please provide a copy of the Tree Care Operator license)

Name _____

Address _____

Phone _____

Email _____

License # _____

C. PROPERTY OWNER:

Name _____

Address _____

Phone _____

Email _____

C. APPLICANT:

Same as Owner

Name _____

Address _____

Phone _____

Email _____

D. CLEAR-CUTTING TREE REMOVAL

Does the tree removal fall under the definition of "clear-cutting" as described in the Tree Removal and Protection Ordinance, Chapter 163 - Section 15

No: _____

Yes: _____

Reason for Exemption (pursuant to Chapter 163-Section 17): _____

E. JOINT PLANNING BOARD APPROVAL

Has the tree removal been previously approved by the Joint Planning Board by resolution

No: _____

Yes: _____ *(If yes, please provide a copy of the resolution approval)*

1. Provide a survey or map drawn to scale showing:
 - The location of all Covered Trees on the property
 - The location of all Covered Trees to be removed (marked with an "X"), with species and DBH
 - If any trees are proposed to be removed because of their proximity to a Structure or to the Property Line, identify the distance of such tree(s) to the Structure or Property Line.

2. Consent Required
 - If any part of the tree is ON the Property Line, the written consent of the adjoining Property Owner is below:
 - Name of Adjoining Property Owner: _____
 - Address of Adjoining Property Owner: _____
 - *Notarized letter of consent must be included with the application*

H. TREE REPLACEMENT PLAN

| DBH of Covered Tree Being Removed | Replacement Trees Required* |
|-----------------------------------|---|
| Less than 6" | None |
| 6" to less than 13" | 1 Replacement Tree for every 1 Covered Tree |
| 13" to less than 23" | 2 Replacement trees for every 1 Covered Tree |
| 23" to less than 33" | 3 Replacement trees for every 1 Covered Tree |
| 33" or greater | 4 Replacement Trees for every 1 Covered Tree |
| Landmark Tree | 5 Replacement Trees for every 1 Covered Tree* |

As in accordance with Chapter 163-Section 24, no person shall remove a Landmark tree without the prior approval of the Mayor and Council

1. Provide a survey or map drawn to scale showing:
 - The location of all replacement trees to be planted (refer to chart above), with species and DBH

I certify that the information contained in this application and in any documents submitted in support of this application, including but not limited to the above List of Covered Trees to Be Removed* is accurate to the best of my knowledge. I grant permission for a representative of the Borough of Demarest to enter my property for the purpose of reviewing this application, and I agree to abide by the applicable provisions of Demarest Code Section 163 — Shade Trees

Owner Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Date Application Submitted: _____