



Protected Tree Removal Application

(In accordance with the Cedar Park Landscape and Tree Ordinance Chapter 14 Section 14.07.017)

Date of Application: _____

Address of Property: _____

Name of Applicant: _____

Name of Owner: _____

Contact Telephone Number: _____ Fax: _____

Diameter of Trunk/ Total Diameter Multi-trunk/ or Total Diameter of Cluster (measured 4.5' from ground): _____ inches.

General Condition: _____

Reason for Requesting Removal: _____

To accompany your request, please provide a photograph of the tree, if possible, and provide a sketch showing the exact location of tree on the property on the reverse side of this form or on a separate sheet of paper.

Applicant's Signature

Date

Action on Request: Approved Denied

City Staff Comments: _____

Conditions of Approval:* _____

*Signature of Applicant

Date

Signature of City Staff

Date