

APPLICATION FORM FOR TREE CUTTING PERMIT - DECLARATION

OWNER'S IDENTITY

| 1° | Individual | |
|------------------|------------|--|
| Name | | |
| Civic number | | |
| City or town | | |
| Postal code | | |
| Telephone number | | |

| 2° | Corporation | |
|---------------------------|-------------|--|
| Corporate name | | |
| Civic number | | |
| City or town | | |
| Postal code | | |
| Director or administrator | | |
| Telephone number | | |

| APPLICANT 'S IDENTITY | | | |
|-----------------------|--|--|--|
| Corporate name | | | |
| Applicant's identity | | | |
| Civic number | | | |
| City or town | | | |
| Postal code | | | |
| Representative | | | |
| Telephone number | | | |

| CIVIC NUMBER OF BUILDING WHERE CUTTING TREE WILL BE CARRIED OUT | | |
|---|----|--|
| Civic number | | |
| Lot number (cadastral) | | |
| Crossroads | et | |
| Uses of building | | |

Initials of applicant : _____

APPLICATION FORM FOR TREE CUTTING PERMIT - DECLARATION (continuation)

| REQUIRED DOCUMENTS TO BE ATTACHED WITH TREE CUTTING PERMIT APPLICATION | | |
|--|-------------|--|
| Location certificate | [] Attached | |
| Pictures in colour of tree | [] Attached | |
| Scaled plan at 1 :200 | [] Attached | |
| Study | [] Attached | |
| Tree's species | | |
| Remarks | | |

REASONS TO JUSTIFY THE TREE CUTTING PERMIT APPLICATION

Explain the reasons to justify your tree cutting permit application

DECLARATION

[] I, hereby, declare that I am the owner of the tree

(Signature of applicant)

(Full name in block letters)

(day - month - year)

| WORK SHEDULE | | |
|---------------------------------|--|--|
| Date when work will begin | | |
| Date when work will be finished | | |

OTHERS REQUIREMENTS AND/OR INFORMATIONS

The authority having jurisdiction (director of Urban planning and business services department) may required any other relevant document to complete the study Present your cutting tree permit application to the Permit and Inspections division

Urban planning and business services department ---Permit and inspection division 5160, Decarie blvd, suite 865. Montreal (Québec) H3X 2H9

(Signature of applicant)

(Fulle name in block letters)

(day - month - year)

CUTTING TREE PERMIT APPLICATION FORM.

REQUIRED DOCUMENTS

- Location certificate (land surveyor certificate)(3 copies);
- Pictures of the tree (3 copies in colour);
- Scaled plan drawn at minimum scale of 1:200, showing location, diameter or species of concerned tree by the cutting tree permitt application (3 copies);
- «Cutting tree permit application form »-- Declaration » completed and signed

Urban planning and business services department—Permit and inspections division 5160, Decarie boulevard, suite 865. Montréal (Québec) H3X 2H9

INFORMATIONS : 514 872-5160