

# Tree Removal Permit Application Packet



**TREE CITY USA**

The City of Port St. Lucie has adopted requirements to preserve protected trees with a diameter at breast height of twelve (12) inches or greater, and native palms with a clear trunk of (10) ten feet or greater. Permits for the removal or relocation of a protected tree shall be obtained by filing an application with the Planning and Zoning Department. Removal or damage of any protected tree without an approved permit is unlawful and can result in fines or penalties. Please review the requirements of the Landscape Code before preparing your proposal. For information on tree pruning, visit [www.FPL.com/trees](http://www.FPL.com/trees) and [http://edis.ifas.ufl.edu/topic\\_tree\\_pruninghttp](http://edis.ifas.ufl.edu/topic_tree_pruninghttp).



CITY OF PORT ST. LUCIE
PLANNING AND ZONING DEPARTMENT
APPLICATION FOR TREE REMOVAL PERMIT

Planning and Zoning Department
121 SW Port St. Lucie Boulevard
Port St. Lucie, Florida 34984
(772) 871-5212 FAX (772) 871-5124

Planning Dept \_\_\_\_\_
Fee (Nonrefundable)\$ \_\_\_\_\_
Receipt # \_\_\_\_\_

Application Fee: \$35.00

PRIMARY CONTACT EMAIL ADDRESS: \_\_\_\_\_

PROPERTY OWNER:

Name: \_\_\_\_\_
Address: \_\_\_\_\_
Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

AGENT OF OWNER (if any)

Name: \_\_\_\_\_
Address: \_\_\_\_\_
Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

APPLICANT IS: (Check one)

Property Owner of Record
Purchasing the property\*
Agent authorized by the owner\*
Lessee of the subject property\*
Other

\*Written authorization signed by the record owner must be attached

PROPERTY INFORMATION - all information must be filled out

Street Address: \_\_\_\_\_
Legal Description: \_\_\_\_\_
(Include Plat Book and Page)
Parcel I.D. Number: \_\_\_\_\_
Property size: \_\_\_\_\_ Zoning: \_\_\_\_\_
Is the proposed tree removal part of a project that will require a building or clearing permit? \_\_\_\_\_

SUBMITTAL REQUIREMENTS

The following materials and/or information must be submitted with this application:

- 1. A list of species, size\*, and location of the tree(s) proposed to be removed.
\*Diameter as measured 4-1/2 feet above grade
2. A statement of reason for the proposed tree removal.
3. A written recommendation by a professional licensed arborist concerning the health and quality of the tree(s) in question, and possible alternative actions (if applicable).

4. A tree location survey, containing, at a minimum, the following information:
  - a. All protected trees on the property by trunk location, diameter, tree species (botanical and common name), and height and canopy spread of each tree.
  - b. Indicate each protected tree to be altered, removed, destroyed, or relocated, and each tree to be protected. If existing trees are to be transplanted, the proposed relocation for such trees shall be shown on the drawing, together with a statement as to how such trees are to be protected and maintained.
  - c. A statement indicating how trees not proposed for removal or relocation are to be protected during land clearing and construction (if applicable).
  - d. Outline all structures on the property and property lines.
  - e. Location, size and species of replacement trees (if applicable).

**SIGNATURE**

I hereby certify that I am the applicant for the Tree Removal Permit in this application, that I have read the foregoing application and attached ordinance, and know the contents thereof to be true and accurate to my own knowledge, and assume all responsibility for their accuracy. I understand that should any information or representation submitted in connection with this application be inaccurate, erroneous, or incomplete, the Zoning Administrator may rescind any approval or take other appropriate action. I hereby authorize the Zoning Administrator, or his or her designee, to access the property for the purpose of site visits. I understand that additional information may be required by the Zoning Administrator to review this project.

**Signed:** \_\_\_\_\_  
(Property Owner of Record)

**Signed:** \_\_\_\_\_  
(Authorized Agent)

<b>FOR OFFICE USE ONLY</b>	
Approved By and Date: _____	Not Approved and Date: _____
Reasons for Approval/Denial: _____ _____	
Conditions of Approval: _____	

A decision by the Zoning Administrator to deny or approve a tree removal request may be appealed by an affected party with standing to the Board of Zoning Appeals within 15 days of the date of the Zoning Administrator's decision, provided, that written notice of the appeal shall be filed with the City Clerk within that period of time.