



Date: _____

AGOURA HILLS

Planning Department

30001 Ladyface Court, Agoura Hills, CA 91301 Phone (818) 597-7339 / Fax (818) 597-7352 www.ci.agoura-hills.ca.us

OAK TREE PERMIT APPLICATION

A.P.N.:	Project Address:	Oak Tree Permit No.:
Property Owner's Name (<i>Print</i>):	Applicant's Name:	Contractor's Name:
Property Owner's Address:	Applicant's Address:	Contractor's Address:
Property Owner's Phone No.:	Applicant's Phone No.:	Contractor's Phone No.:
Property Owner's Email Address:	Applicant's Email Address:	Contractor's Email Address:

Description of the Request and Reason: All applications for an Oak Tree Permit require a written statement by the applicant justifying any actions involving protected oak trees. The decision of the Planning Director will be based on the applicant's ability to make the findings required by the City Oak Tree Ordinance and the City Oak Tree Preservation Guidelines.

Describe Request:

Reason:

Site Plan: show the location of the oak tree(s) and structures

Access

Applicant Signature _____

Date _____

MATERIALS REQUIRED FOR SUBMITTAL OF AN APPLICATION

The following list specifies the information that may be required in order for you to submit this application. Your application cannot be accepted until all information required by the Planning Department is submitted.

REQUESTED EXHIBITS	INITIAL FEES FOR PERMIT REVIEW	
<input type="checkbox"/> Standard Application Form <input type="checkbox"/> Oak Tree Report <input type="checkbox"/> Site Plan/Grading Plan <input type="checkbox"/> Photographs <input type="checkbox"/> Other	<u>Administrative Review</u> <input type="checkbox"/> Planning Staff Fee	<u>Res./Comm.</u> \$371/\$662
	<u>Consultant Review for Administrative Approval</u> Full Cost of Review with a minimum deposit for: <input type="checkbox"/> Up to 5 trees <input type="checkbox"/> 5 trees or more	<u>Res./Comm.</u> \$525/\$700 \$1,000/\$1,200
	<u>Consultant Review for Planning Commission Approval</u> <input type="checkbox"/> Full Cost of Review with a minimum deposit of: <input type="checkbox"/> Up to 5 trees <input type="checkbox"/> 5 trees or more	<u>Res./Comm.</u> \$2,000/\$3,000 \$3,000/\$4,500
<input type="checkbox"/> Site inspected on: _____	<u>Minor Oak Tree Permit</u> <input type="checkbox"/> Administrative Review Fee <input type="checkbox"/> Consultant Review Deposit	\$135 \$275

Note:

In case of emergency caused by the oak tree being in a hazardous or dangerous condition, the fee may be waived; such tree may be removed by permission of the City Code Enforcement Officer, City Oak Tree Consultant, or any member of the Police Department or Fire Department, but an Emergency Oak Tree Permit Application must be filed for the record.

AUTHORIZATION

TYPE OF WORK	NOTES
<input type="checkbox"/> Authorized Tree Removals	<input type="checkbox"/>
<input type="checkbox"/> Authorized Dead-wooding	<input type="checkbox"/>
<input type="checkbox"/> Authorized Pruning-Live Tissue	<input type="checkbox"/>
<input type="checkbox"/> Authorized Encroachments	<input type="checkbox"/>

Reviewed and site inspected by: _____
Oak Tree Consultant Date

Approved and issued by: _____
Planning Director Date

PAYMENT

Case No.:	Date	Fees	Deposits
Trust Account Name:	_____	_____	_____
Comments:	_____	_____	_____