

Date:_		 	

Department of Planning and Community Development30001 Ladyface Court, Agoura Hills, CA 91301 Phone (818) 597-7309 / Fax (818) 597-7352 www.ci.agoura-hills.ca.us

EMERGENCY - OAK TREE PERMIT APPLICATION

Oak Tree Permit No.:	A.P.N.:				
Application's Information	Legal Owner's Information				
Name:	Name:				
Address:	Address:				
Phone:	Phone:				
Person requesting evaluation (if different than above)	Location/Number of Tree(s)				
Name:					
Address:					
Phone:					
actions involving protected trees. The decision of the Direct	tement by the applicant substantiating the justification for planned or of Planning and Community Development will be based on the ak Tree Ordinance and the City Tree Preservation Guidelines. Please e environment.				
Justify the Request:	C'. M				
	<u>Site Plan:</u>				
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Oak Tree Species	Dbh	Height	Hazardous Rating:			
			<u>Immediate</u>	<u>1 day</u>	3 days	<u>Other</u>
Oak Tree #1						
Oak Tree #2						
Oak Tree #3						
Oak Tree #4						
Conditions inspected and confirmed by:	Date:					
AUTHORIZATION						
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. An application must be filed for the record. An Oak Tree can be authorized to be removed per Section 9650.740.A.B.C.D.						
Authorized Work	Tree #s	1	Conditions/Mitigation Required			
Authorized Tree Removals			□ Species			
			□ Number		□ Size	
Authorized Pruning-Live Tissue						
Oak Tree Consultant			Fees Waived Due			
Authorized by :						
Date						
Acknowledgement						
I,, am the legal owner or responsible agent for the property of the hazardous oak tree(s) described above and assumes all responsibility for the removal.						
Signature: Date:						