



Town of Easton
 Engineering, Planning and Zoning
 14 South Harrison Street, Easton, MD 21601

Tree Removal Request

Application Type

Removal of Healthy Trees Removal of Dead / Dying Trees

Owner

Name			
Mailing Address			
Telephone No.		Email	

Contractor Information

Name		License No.		Expiration Date	
Mailing Address					
Telephone No.		Email			

Property Location

Address							
Tax Map		Grid		Parcel		Lot	

Details of Request

Number of trees to be removed	
Species of tree(s) to be removed	
Number of trees to be replanted	
Species of tree(s) to be replanted	

Is the property located in a subdivision?	Y <input type="checkbox"/>	N <input type="checkbox"/>	Name	
Is the property located in the Historic District?	Y <input type="checkbox"/>	N <input type="checkbox"/>		
Is/Are the tree(s) located within the Critical Area?	Y <input type="checkbox"/>	N <input type="checkbox"/>		
Is/Are the tree(s) located within a Forest Conservation Area?	Y <input type="checkbox"/>	N <input type="checkbox"/>		
Is/Are the tree(s) located within any right-of-way?	Y <input type="checkbox"/>	N <input type="checkbox"/>		
Is/Are the tree(s) located within a landscape buffer?	Y <input type="checkbox"/>	N <input type="checkbox"/>		
Is/Are the tree(s) a Maryland State Champion Tree?	Y <input type="checkbox"/>	N <input type="checkbox"/>		
Is/Are the tree(s) fronting a public road ("street trees")?	Y <input type="checkbox"/>	N <input type="checkbox"/>		

Specific Requirements

- A site plan or accurate drawing shall be included with the application indicating the location of all trees to be removed. The plan shall depict site features such as the location of the 100' Critical Area Buffer, all tidal and non-tidal wetlands, streams, steep slopes, shoreline and any other features relative to the request. The plan shall also identify the locations chosen for replanting.
- A narrative shall be included with the application describing the existing conditions and the proposed work to be accomplished.
- Photographs of trees are to be provided.
- Please provide any landscape architect or arborist evaluation reports.

Any modifications during review shall warrant an updated application.

During review of this application, additional information and action may be required of the applicant and all reviews and approvals shall be obtained prior to the commencement of any work.

I do hereby solemnly declare and affirm that the information provided by this application and the documents attached hereto accurately represent the conditions of the request and that submission of an incomplete application will be returned for correction prior to processing.

Signature of Applicant or Agent	<input type="text"/>
Date	<input type="text"/>
Printed Name of Applicant or Agent	<input type="text"/>

For Office Use Only

Application Date	<input type="text"/>	Application No.	<input type="text"/>
HDC Approval Date	<input type="text"/>	Fee Paid	<input type="text"/>
P & Z Approval Date	<input type="text"/>		
<i>Created 02-2019</i>			