

**Township of Mendham**

2 West Main Street  
P.O. Box 520  
Brookside, New Jersey 07926  
Phone 973-543-4555  
Fax 973-543-6630



Date: \_\_\_\_\_

*Application for Tree Removal Permit on Developed Property*

**\*NO REMOVAL OF TREES IS APPROVED UNTIL INSPECTION HAS BEEN PERFORMED BY THE TREE COMMITTEE.**

Please initial here to acknowledge \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address & Telephone Number: \_\_\_\_\_

Status of Applicant: \_\_\_\_\_

Name of Property Owner/Tree Company: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Lot Size: \_\_\_\_\_

List of Trees to be removed, including number, size and species: \_\_\_\_\_

In Conservation Area (greater than 6 inches in diameter at a point 6 inches above the ground: \_\_\_\_\_

Out of Conservation Area (greater than 24 inches in diameter at a point 4 ½ feet above the ground: \_\_\_\_\_

Reason for Tree Removal: \_\_\_\_\_

Exemptions (subsection 23-4A. 2(B)  
Specify: \_\_\_\_\_

Fee: \$25 \_\_\_\_\_ paid \_\_\_\_\_ waived (subsection 23-4A-6) Reason \_\_\_\_\_

**Signature of Applicant Accepting All Tree Removal Rules**

**Date**

Comments: \_\_\_\_\_

\_\_\_\_\_ Tree Permit # \_\_\_\_\_

**Is road detail applicable? YES \_\_\_\_\_ NO \_\_\_\_\_**