

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: \$10 _____ 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 _____