

CITY OF DAVIS
STREET TREE REMOVAL REQUEST - RESIDENTIAL

(Sections 37.02.020; 37.02.070; 37.03.060; 37.03.070)
Return to: 1818 Fifth Street, Davis, CA 95616
(530) 757-5633 phone // (530) 297-5410 fax // www.cityofdavis.org

\$54.00 Processing Fee

I/We, _____, owner of property at _____ request the removal
Please PRINT (Name) (Address)
and replacement of a _____ tree at my home, located front Left Center Right / Side,
(Tree Species if Known) (Circle to indicate tree location)
when facing property from the street, for the following reasons:

(Fees may be refunded for trees that are found to be dead, or in an eminently hazardous condition.)

The Tree Commission provides leadership and guidance to the Urban Forest Manager and to the City Council regarding tree removal and replacement requests. The Tree Commission provides for the protection, preservation, and enhancement of the Davis urban forest. The Tree Commission is charged to evaluate the need to remove a City tree on a case by case basis for trees in the following condition:

- Poor health, diseases, exceedingly slow growth, large scale limb failure, decay, and continued invasive root problems;
- Potential for hazardous conditions that are caused by the street tree and cannot be mitigated without the removal of the tree.

The Tree Commission does not have the authority to recommend the removal of a City Tree for its debris, such as leaves, fruit, nuts, pollen, pine cones, needles, etc., nor does it have the authority to recommend tree removal for solar collector installation per Municipal Code Section 40.38.00.

The Tree Commission does not have the authority to remove a tree if it is healthy.

All Tree Commission decisions can be appealed to the City Council for their consideration. Appeals must be made within 10 Days of Tree Commission ruling notification.

I have read above Tree Commission statement and understand the conditions outlined:

_____ Signature	_____ Date		
_____ Mailing Address (if different than above)	_____ City	_____ State	_____ Zip
_____ (Area Code) Telephone Number	_____ E-Mail Address		

DO NOT WRITE BELOW THIS LINE – OFFICIAL USE ONLY

Assessment of tree condition by Staff: _____

Date Fee Paid: _____ Amount Paid: \$ _____ Received By: _____
Use Tran Code: .4623 City Tree Permit Fee RecTrac Household # _____ RecTrac Receipt # _____