

CITY OF LONGWOOD

Community Development Division, Department of Community Services
174 W. Church Avenue Longwood, FL 32750
Phone 407-260-3462 FAX 407-263-2336

ARBOR PERMIT APPLICATION

Property Plat Must Be Attached Indicating Existing Trees And Replacement Trees

It is the applicant's responsibility to ensure that the current requirements of the applicable portions of the City Codes are met.

Please refer to the Longwood Development Code / Article III / 3.5.5 Tree Protection Standards which applies those trees with a trunk diameter of three (3) inches DBH or more.

Application Submission Requirements Checklist:

- _____ A tree survey by a licensed Surveyor, or Arborist, in compliance with City Development Code requirements.
- _____ The location of existing & proposed structures & driveways.
- _____ The site area in square feet.
- _____ Payment of the required NON-REFUNDABLE application fee.

Permit Issuance Criteria:

- _____ 1. Approval for tree removal shall only be granted on a developed lot or a lot with an application for development approval where such tree or trees unreasonably restricts the otherwise allowable use of the property.
- _____ 2. The tree is diseased, injured, endangers existing structures, interferes with the safe provision of utility services, or creates a hazard to visibility for motorists.
- _____ 3. Replacement or relocation of trees approved for removal shall be required. Where replacement trees are allowed, the total of the inches in diameter of the replacement trees shall be equal to or greater than the total of the inches in diameter of the removed trees.

Permit Application Fees:

- 1. Non-Residential Arbor Permit\$100.00
- 2. Residential Arbor Permits\$ 20.00
- 3. Subdivision Arbor Permits\$ 20.00 / Lot

*Failure to obtain an arbor permit shall subject the violator to the code compliance provisions of the Longwood City Development Code

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ARBOR PERMIT APPLICATION

MUST POST PERMIT ON SITE TO BE VALID

Arbor Permit Number (City Use Only)

Permit Fee

Contractor

Phone

Street Address

City

State

Zip

Property Owner

Phone

Project Name (if applicable)

Check One

Single Lot _____

Development _____

Location or Street Address

City

State

Zip

Parcel Tax ID Number

Certification

I, the undersigned, have read, and understand and agree to comply with all of the relevant requirements of the City of Longwood Development Code and agree by the guidelines in the attachments.

Applicant Name (Print)

Signature

Date

Applicant Name (Print)

Signature

Date

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