

Somerset Lake Service Corporation

P.O. Box 7368, Wilmington, DE 19803 Phone: (302) 475-7660 FAX: (302) 475-7664

bvprops@gmail.com

TREE REMOVAL REQUEST FORM

This form, with supporting photos and documentation, must be submitted to the SLSC and **you must receive approval before removing trees**. Your request will be reviewed **within 30 days of receipt** by the SLSC. All supporting documents will be retained by the SLSC unless otherwise requested by you. Approval of your request by the SLSC does not fulfill other obligations which might be required by Township, County, State or National codes and/or laws. Please call 811 to have utility lines marked prior to tree removal.

*Please mark all trees to be removed before taking photos and leave the markers on the trees until a decision is made. Ribbon material is available from the Clubhouse Manager.

APPLICANT INFORMATION			
Full Name:	Date:		
Street Address:			
Home Phone:	Cell Phone:	Email:	
TREES TO BE REMOVED			
Is the tree(s) to be removed	(check answer):		
At risk of falling? Yes Diseased or dead? Yes Been evaluated by an arbor Within 15 feet of adjacent p Other reason? Yes I	\square No ist or tree expert? \square Yes \square No property? \square Yes \square No	o If Yes, please	e include report.
Please describe the tree(s) to neighbors and reason for	romoval	distance from ne	ighbor's property line, any potential impacts
	For Office/Committee	e Use Only (no cha	anges)
Approved Necessary revisions or comm		Denied	Date: