

Town of Howey-in-the-Hills Tree Removal Application Checklist

Existing Residential	New Residential
Existing Commercial	New Commercial
-	
Site Address:	
Owner:	Phone #:
Contact:	Phone #:
Application Form.	
Photos of the site or trees to be remove	ved if necessary.
Copy of license from the tree remova	l company.
Copy of general liability insurance.	
C	
Copy of worker's comp.	
Cive detailed availance in as to value	he tree monds to be removed on if necessated
Give detailed explanation as to why t	he tree needs to be removed or if requested
Submit an arborist report	

Town of Howey-in-the-Hills

Tree Removal Permit Application

Date:	Tree Permit #:		
Owner(s) Name:	Phone #:	Phone #:	
Owners Address:			
Street	City/ST	Zip Code	
Contractor Company Name:	Pho	Phone #	
Contractor Address:			
Street	City/ST	Zip Code	
Contractor License No			
Job Name:			
Job Address:			
Street	City/ST	Zip Code	
Job Description:			
Гуре of tree(s) requested to be remov	red:		
Signature	Contr	Contractor Signature	

Click here to submit