**Tree Ordinance Review Application**

**Development Services Department**
One Texas Center, 505 Barton Springs Road, 4th floor, Austin, TX 78704
Phone: (512) 974-1876 Fax: (512) 974-3010
Email: cityarborist@austintexas.gov Website: www.austintexas.gov/department/city-arborist

**Application request** (specify all that apply):

- Tree removal (LDC 25-8-602[3])
- Critical Root Zone impacts (ECM 3.5.2 A)
- Live canopy impacts of more than 25% (ECM 3.5.2 B)

Address and zip code of property: ______________________________________________________________

Name of owner or authorized agent: _______________________________________________________________

Building permit number (if applicable): __________________________
Telephone #: _________________ Fax #: ________________ E-mail: ___________________________________

Tree Species: ____________________________ Tree location on lot: ___________________________________

Trunk size (in inches) at 4 ½ feet above ground: circumference (around) ________ or diameter (across) ________

General tree condition:
- Good /
- Fair /
- Poor /
- Dead

Reason for request:
- Development
- Tree condition
- Other: _______________________________________

_______________________________________
Owner/ Authorized Agent Signature

_____________________________      _____________
Date

- Proposed development projects are to include a plan view drawing that depicts the location of the tree and the planned improvements (e.g. structure, driveway, utility and irrigation lines).
- This permit application only reviews for compliance with tree regulations.
- The application fee must be paid prior to permit issuance. No fee is required for dead or diseased trees.

**Application Determination – To be completed by City Arborist Program Personnel**

- Approved
- *Approved With Conditions
- Statutory Denial (more information required)
- Denied

Comments_____________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

- Heritage Tree(s)
- A heritage tree variance is required:
- Administrative /
- Land Use Commission

**Conditions of Approval:**
- None
- As described within Arborist Comments (see above); and

- Applicant agrees to plant ____ caliper inches of central Texas native trees (see ECM Appendix F) on the lot prior to obtaining a final inspection (if applicable). Trees are to have a minimum 2-inch trunk diameter. Examples include Oaks, Cedar Elm, Bald Cypress, Desert Willow, Mountain Laurel, Texas Persimmon, Mexican Plum, etc.

- Prior to development, applicant agrees to supply a root zone mulch layer and maintain tree protection fencing (chain-link, five-foot in height) throughout the project duration.

- No additional impacts are permitted within the ½ Critical Root Zone, including utility trenching.

- Provide a receipt from a certified arborist for: remedial root care any required pruning

_______________________________________  ___________________________
Applicant Signature                        Date

_______________________________________
City Arborist Signature

Post this document on site while any proposed work is in progress.

Conditions for approval of this application must be met within 1 year of the effective date.