The City of Canal Winchester
Development Department
45 E. Waterloo Street
Canal Winchester, Ohio 43110
Phone (614) 837-7501 Fax (614) 837-0145

TREE AND WOODLAND REMOVAL AND WORK PERMIT APPLICATION

PROPERTY OWNER

Name _____

Address _____

Phone _____ Email _____

APPLICANT

Name _____

Address _____

Phone _____ Email _____

Address of Subject Property _____

Subdivision and Lot Number (if applicable) _____

If WOODLAND, include a detailed drawing to scale of the proposed project.

Are the trees greater than six (6) inches in diameter (dbh)? ☐ Yes ☐ No

Attach three (3) copies of a tree survey prepared by a certified arborist or professional forester. Additional information per Chapter 1191 of the Zoning Code may be required by the Urban Forester.

I certify that the information provided with this application is correct and accurate to the best of my ability.

Property Owner's or Authorized Agent's Signature **Date**

DO NOT WRITE BELOW THIS LINE

Date Received: ____ / ____ / _____ Fee: $_____

Date of Action: ____ / ____ / _____ Paid: ☐

Expiration Date: ____ / ____ / _____

Historic District: ___ Yes ___ No

Preservation District: ___ Yes ___ No

Application Approved: ___ No
___ Yes
___ Yes, with conditions

_____
Urban Forester