

**BOROUGH OF FORT LEE
BUILDING DEPARTMENT
1365 INWOOD TERRACE, FORT LEE, NJ 07024
(201) 592-3500x 1503**

DATE RECEIVED: _____

DATE ISSUED: _____

PERMIT#: _____

A. IDENTIFICATION - Applicant: Complete All Application Information.

Work Site Location: _____

Owner: _____

Address: _____

Tel: () _____

Tree Expert: _____

Address: _____

Tel: () _____

TYPE OF WORK:

TREE REMOVAL

Permit Fee: \$75.00 Per Tree

No. of Trees: _____

Total Fee: _____

Check No.: _____

Cash: _____

Escrow (If Applicable): _____

Purpose of Proposed Tree Removal / Location on Property: _____

(Survey With Location of Trees & Proposed Removal in Relation to Structures Must Be Attached)

Final Inspection Required: _____

Approved By: _____

White-Applicant Copy

Canary-Inspector's Copy

Pink -Office Copy