

### **INCORPORATED VILLAGE OF SHOREHAM** BUILDING DEPARTMENT PO Box 389, Shoreham, New York 11786 (631) 821-0680 – Fax (631) 821-4102 www.shorehamvillage.org

## TREE REMOVAL PERMIT APPLICATION CHECKLIST

This worksheet is presented as a guide for preparation of a complete building permit application. Please include all of the documents and items required for the proposed work. Additional information is available at the Village website at <u>www.shorehamvillage.org</u>

Application Requirements:					
1.	Tree Removal Application	(page 2) Signed & notarized	Y / N		
2.	Current Survey (3 copies)	Trees to be removed to be demarcated (as much as practical)	Y / N		
3.	Owner's Authorization	(page 3) Required if applicant is other than the property owner	Y / N		
4.	Pictures	Pictures of trees to be removed with noted sizes (calipers or circumferences). Notes are welcome.	Y / N		
5.	Arborist Certification	Required for any proposed large tree removal and/or proposed removals in excess of allowed by Code Chapter 28	Y / N		
6.	Contractor	Contractor/Landscaper to be licensed and insured	Y / N		
7.	Fee	\$100 (minimum permit application)	Y / N		

#### **Application Requirements:**

### TREE REMOVAL WORK SHALL NOT BEGIN UNTIL THE APPLICANT HAS SUBMITTED ALL OF THE REQUIRED DOCUMENTATION AND A PERMIT HAS BEEN ISSUED.

### Per Chapter 28 of the Code of the Village of Shoreham, all trees are protected from clearing/removals.

- Large trees: defined as a live tree having a trunk measuring sixty-two (62) inches or more in circumference at a breast height of four (4) feet above natural grade (10"+ caliper) not permitted to be removed (certified arborist letter must be submitted)
- Medium trees: defined as a live tree having a trunk measuring thirty-eight (38) inches or more in circumference, but less than sixty-two (62) inches in circumference, at a breast height of four (4) feet above natural grade (6"+ caliper) no more than one medium tree per 12-month period may be removed
- Small trees: defined as a live tree having a trunk measuring nineteen (19) inches or more in circumference, but less than thirty-eight (38) inches in circumference, at a breast height of four (4) feet above natural grade (3"+ caliper) no more than tree small trees per 12-month period may be removed
- A combination of one medium and one or two small trees may be removed under one permit, provided the amount does not exceed each of the prescriptive limits and/or three trees.
- Vegetation smaller than the definition of a small tree may be removed/maintained as the property owner sees fit and as not cause a nuisance to neighbors. It is recommended that the Building Department be notified of any proposed clearing of vegetation so that the site may be evaluated in accordance with the Tree Removal Ordinance

### SITE VISIT OR INSPECTIONS MAY BE REQUIRED BY THE BUILDING INSPECTOR



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## TREE REMOVAL PERMIT APPLICATION

PART I: Owner Information – Please print below						
Property Location :	SCTM#	SCTM# 207				
Owner(s) of Record :						
Phone:						
Mailing Address of Owner(s):						
PART II: Agent / Contractor Information (responsi	City ible for filing & receiving corresp		1			
Agent responsible for proposed work:						
Phone:	Email:					
Mailing Address of Agent:						
PART III: Proposed Tree Removal Details – Please	City	State	Zip Code			
Tree #1: Size/Class: <b>S</b> / <b>M</b> / <b>L</b> Location:	Reason:					
Tree #2: Size/Class: <b>S</b> / <b>M</b> / <b>L</b> Location:	Reason:					
Tree #3: Size/Class: <b>S</b> / <b>M</b> / <b>L</b> Location:	Reason:					
Add'l Trees (arborist required):						
Will removal affect any existing structures/retaining wal If yes, please be advised that additional review, permit a			gInspector			
Contractor:	Suffolk County Lice	ense #:				
Arborist:	ISA License #:					
<b>PART IV:</b> Notary Public – Please type or print below APPLICATION IS HEREBY MADE FOR ISSUANCE OF A Building Code of the State of New York, and all amendments t						
STATE OF NEW YORK, COUNTY OF SUFFOLK) ss: (Print being duly sworn deposes and says that he/she is the applicant						
They are the (Owner or Agent: Contractor, Officer, RA, PE, et duly authorized to perform or have performed the said work, as that all statements contained in this application are true to the b forth in this application, plans and specifications filed herewith	best of his knowledge and belief; and th	of sa cifications, and to ma at the work will be p	id owner or owners, and is ke and file this application; erformed in the manner set			
Sworn to before me this day						

of \_\_\_\_\_, 20\_\_\_\_\_

Applicant Signature



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## **OWNER'S AUTHORIZATION**

STATE OF	
COUNTY OF	) ss.: )
I, (owner)	
Residing at:	
Being the owner of premises (Property Loca	ation)
Also known as Suffolk County Tax Map Nu	imber (SCTM #:)
Hereby authorize (Agent)	
Whose mailing address is (Agent Address)	
	tion and interfacing with the Building Department for (Description of Proposed Work)
Of the Village of Shoreham, and to received	and/or file any documents required with reference to my application for
(Owner)	
T11	

I hereby agree to allow my agent, whose name appears above, to act on my behalf and I further agree to abide by any requirements imposed by this Board as a condition of their approval.

Owner Signature

Sworn to before me this \_\_\_\_\_ day

of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public