APPLICATION FOR TREE REMOVAL PERMIT TOWNSHIP OF INDEPENDENCE, WARREN COUNTY NEW JERSEY

NOTE: See chapter 365 of the Code of the Township of Independence entitled "Trees" for details of submission requirements and procedures.

NAME:			
ADDRESS:			
TELEPHONE NO(S):			
FAX NO.			
BLOCK #:			
LOT #:			
LOCATION OF SITE:			
Is the applicant the property owner?	Yes	No	
Is the property located on a public road?	Yes	No	
Is the property part of a subdivision or site Township of Independence?	plan that wa	as approved by the	e Land Use Board of the
Township of independence.	103	110	
If yes, what application?			

TREE REMOVAL PERMIT

How many trees are proposed to be removed? What are their size and species?			
What is the size of the property?			
Is the property where the removal is proposed being used as a nursery, garden center or orchard or contains a working farm?			
Is the property in question the subject of a woodland management plan approved by the State of New Jersey?			
Was the property in question the subject of a tree removal permit application within the last twelve months?			
Applicant's Name (Printed)			
Applicant's Signature			
Date:			
DO NOT WRITE BELOW THIS LINE			
APPROVAL DATE:			
APPROVED BY:			
CONDITIONS:			

/forms/zoning tree removal permit