

RESOURCE MANAGEMENT SERVICES | COMMUNITY DEVELOPMENT 440 Harcourt Avenue Seaside, CA 93955

Telephone (831) 899-6825 www.ci.seaside.ca.us

APPLICATION FOR PERMIT TO TRIM, REMOVE OR PLANT A TREE ON PRIVATE PROPERTY

		File Number:			
Name of Applicant:		Telephone:			
Tree Location Address:					
Property Owner Name:	Telephone:				
Mailing Address:					
	City		State Zip		
E-mail:					
Please Provide Reason For:	rovide Reason For: Trimming Removal		☐ Planting		
Please sketch or attach drawir	ng or picture(s) of th	e location of tro	ee(s) on the	e property:	
Property Owner Signature:			Date:		
	(Park Staff Use On	ıly)			
CITY STAFF RECOMMENDATION	ON:				
CONDITIONS FOR TREE REMO	DVAL / TRIMMING:				
Grind stump Replant a Tree Other					
Approved: Disappro	oved:				
Resource Management Services Authorization Agent: D				Date:	

THIS PERMIT SHALL EXPIRE IF NOT IMPLEMENTED WITHIN 45 DAYS FROM THE DATE OF APPROVAL FOR TREE PERMIT INFORMATION, PLEASE CALL 831-899-6723 PLEASE ALLOW 5 BUSINESS DAYS FOR PROCESSING NOTE: ORIGINAL TO RESOURCE MANAGEMENT FILE - PDF TO CODE ENFORCEMENT - PDF COPY TO PARKS DEPARTMENT