



CITY OF SUNNYVALE
 DEPARTMENT OF PUBLIC WORKS
 PARKS AND TREES DIVISION
 (408) 730-7506



CITY STREET TREE WORK PERMIT APPLICATION

Date: _____

Owner(s)/Applicant(s) Name: _____

Owner(s)/Applicant(s) Address: _____

Owner(s)/Applicant(s) Phone: _____

Address of City Street Tree: _____

Number and Species of Trees: _____

Request to: Plant Remove Construct around Perform maintenance

Reason for request: _____

In accordance with Sunnyvale City Tree Ordinance 2385-91, I/We, _____ request permission to perform the service(s) indicated above, to the City street tree in the public right-of-way.

Person or firm performing work: _____

Phone: _____ License Number: _____

Please be sure that you have attached the following items to this application:

- Contractors' proof of insurance (Workers' Compensation, liability and property damage)
- Homeowners' proof of insurance (Liability and property damage)

Incomplete applications will be returned. This is NOT a permit.

 Owner/Applicant's signature

 Date