



# City of South Pasadena

COMMUNITY IMPROVEMENT

**Office Address:**  
6940 Hibiscus Ave S  
South Pasadena, FL 33707

**Mailing Address:**  
7047 Sunset Dr S  
South Pasadena, FL 33707

**\*PHONE: (727) 343-4192 \* FAX: (727) 381-4819\***

## Tree Removal - Replacement Permit Application

**PERMIT #** \_\_\_\_\_

1. A signed copy of the contract or proposal is required on **all** permits.
2. Survey is required for **all** fences, driveways, additions, and pools.
3. An original or certified copy of Notice of Commencement is required on **all** jobs of \$**2,500** or greater in value, and must be provided at the time of permit issuance; provide a stamped, addressed envelope to the property owner.
4. Contractor's authorization to pull permits must be on file.

*City Code section 183-4 allows an applicant to re-landscape a site provided the new landscape plan contains more canopy coverage than the existing landscaping.*

Date \_\_\_\_\_ Valuation of Job \$ \_\_\_\_\_

Name of Contractor \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Office Phone # \_\_\_\_\_ Contact Person & Phone # \_\_\_\_\_

Property Owner \_\_\_\_\_ Phone: \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Construction Address \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

\*\*Attach additional sheets if necessary.

**Number of Trees being REMOVED:** Give details including the location, species, square footage of canopy for each tree proposed for removal. Attach a sketch of the site identifying each tree proposed for removal in sufficient detail to allow City inspectors to identify each tree.

Tree Species	Canopy Size (sq. ft.)	Location	Reason
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Square footage of canopy to be **REMOVED**: \_\_\_\_\_

**Number of Trees being REPLACED:** Give details including the location, species, square footage of canopy for each tree proposed for removal. Attach a sketch of the site identifying each tree proposed for removal in sufficient detail to allow City inspectors to identify each tree.

Tree Species	Canopy Size (sq. ft.)	Proposed Location	Reason
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Square footage of canopy proposed to be **REPLACED**: \_\_\_\_\_

**If any trees on site are being RELOCATED,** give details of species, size, location and proposed new location:

Tree Species	Canopy Size (sq. ft.)	Location	Reason
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I understand that a separate permit must be secured for all work not provided in this application. I certify that all foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating zoning and construction.

Contractor or Agent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Contractor or Agent's Name \_\_\_\_\_ Date \_\_\_\_\_

Application Approved by \_\_\_\_\_ Date \_\_\_\_\_