



City of La Verne Heritage Tree Permit

Community Development Department
3660 D Street
La Verne, CA 91750
(909) 596-8706

Applicant's Name _____ Phone: _____

Address _____

Address of Property _____

Property Owner's Name: _____ Phone: _____

Property Owner's Signature: _____ Date: _____

APN _____ Zone _____ Received by _____

Contractor (if applicable) _____

Contractor's Address _____

State Contractor's License # _____ Business License # _____

Type of License _____ Phone _____

Description and Specific Location of Proposed Heritage Tree Pruning or Removal: _____

Size of caliper to be removed: _____ Amount of crown to be removed: _____

Please attach a site plan of tree location relative to property lines, setbacks, etc and attach photos of subject tree(s).

Homeowner's Association Approval (if applicable) required prior to issuance of tree permit:

Association Representative _____ Date _____

The proposed tree pruning or removal has been determined to meet the required findings of the Adopted Heritage Tree Ordinance and is approved by the Community Development Director:

Hal G. Fredericksen, Community Development Director _____ Date _____

Conditions: _____

