

MONMOUTH COUNTY SHADE TREE COMMISSION

**Public Works Complex
250 Center Street
Freehold, NJ 07728-5033**

PERMIT # _____

MONMOUTH COUNTY SHADE TREE COMMISSION PERMIT APPLICATION

Company: _____

Address: _____

Contact Person: _____

Phone Bus.: _____

Cell: _____

Fax: _____

WORK LOCATION(S)

County Road(s) Name/Rt. #: _____

County Road(s) Name/Rt. #: _____

Proposed Start Date: _____

Proposed Completion Date: _____

Work Description (include details & show sketch or include maps)

All tree work including but not limited to: trimming, topping for removal, pruning, bracing and cabling, transplanting, planting and plant health care, must be performed in accordance with the latest revisions to NJCTE Board of Tree Experts Standards, ANZI Z-133.1 and A-300 Standards, OSHA and Vertical Standards for working in proximity to energized conductors. All brush, limbs, logs and/or chips **Must** be removed from site. Stumps **Must** be cut or Ground Flush to Ground Level. **No Exceptions**. Any failure to comply with the standards is just cause for the revocation of the permit and possible fines as permitted by law. Each violation will be considered a separate and distinct offense. Permit valid for one year.

Check the appropriate work being requested under this application. (Check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Removal | <input type="checkbox"/> Pruning | <input type="checkbox"/> Pesticide Application |
| <input type="checkbox"/> Trimming | <input type="checkbox"/> Topping for Removal | <input type="checkbox"/> Planting |
| <input type="checkbox"/> Stump Removal | <input type="checkbox"/> Herbicide Treatment | <input type="checkbox"/> Other |

Signature of Company Authorized Person

Approved By: (County Agent)

Date: _____

Date: _____

District #: _____

Special Conditions: _____
