Tree Removal Application

CityofRedmond WASHINGTON

Property Information

Name of Property Owner(s): _____

Site Address: _____

Tax Parcel Number: _____

Property Square Footage: _____

Location of trees to be removed: ☐ Front ☐ Side ☐ Rear

Office Use Only

PROJ: _____ DATE: _____

TREE: _____

ACCEPTED BY: _____

PAYMENT METHOD: _____ TYPE: _____

Submittal Requirements

1. Complete Application Form
2. Site Sketch [see * on bottom of next page for new single-family construction]
3. Arborist tree assessment for each hazardous tree [use **Redmond Tree Health Assessment Form**]. Site photos may be submitted in lieu of Assessment Form if photos show evidence of dead, diseased, or dying tree(s). Photos can be attached to this application.
4. Completed Exception Request Form for healthy Landmark tree removal or exceeding maximum # of trees allowed for removal.
5. No fee for single-family zoning; $115.11 fee for commercial, multi-family, or industrial.

Applicant Information

Applicant Name: _____

Company Name: _____

Mailing Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

E-mail _____

Select Billing Contact: ☐ Applicant ☐ Owner

Tree Information

	Tree Species	Tree Diameter (4.5 feet above grade)	Dead, diseased, or dying	Total Hazard Rating	Protected Tree or within a Critical Area	Proposed Replacement
Ex.	*Douglas Fir*	*18"*	*Dead*	*9*	*No*	*Cedar*
1.						
2.						
3.						
4.						
5.						
6.						

Building Owner or Authorized Agent

By my signature, under penalty of perjury, I certify that I am the property owner or authorized to file this application on the property owner's behalf.

Print Name: _____ Date: _____

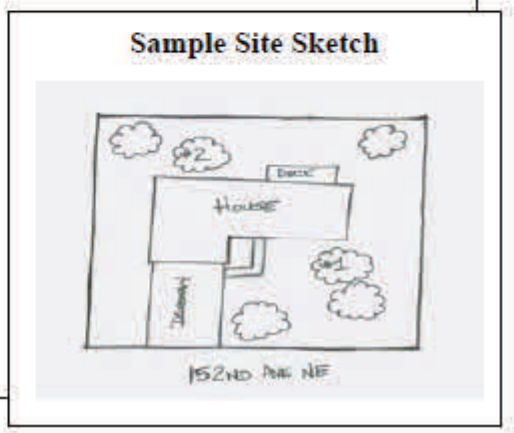
Signature: _____

Certified Arborist Documentation

I, _____ have evaluated the trees listed as dead, diseased, dying, or has a significant structural defect in the table under "Tree Information" and determined that the trees are structurally unsound and pose a hazard to property. My analysis supporting this finding can be found in the attached Tree Hazard Assessment Form(s).

Certified Arborist Signature	Arborist Certification # and Expiration Date
Phone Number	Email Address

Site Sketch



*__New Single –Family Construction:__ For tree removal associated with the construction of a new single-family home or an addition to an existing single family home, please include a scaled site plan on a separate sheet in lieu of a Site Sketch (above). Please use the site plan you submitted with your building permit and show the location of trees to be removed as part of the construction.

Tree Removal Expcetion Request Form

Per the RZC 21.72.090, a written request for an exception is required for the removal of healthy landmark trees or to remove more trees than the maximum allowed per calendar year.

I, _____ am requesting the removal of _____ healthy landmark tree(s) and/or _____ trees

(name of property owner) *(# of trees)* (# of trees)

above the maximum allowed per calendar year as described on the application form attached to this Exception form. The tree(s) is/are located on my property at _____. I feel that an exception consistent

(property address)

with the criteria under RZC 21.72.090 is necessary for the reasons described below:

1. ***Special Circumstances** related to the size, shape, location or surrounding of the property.

   (Give examples for each tree such as the tree is lifting/damaging the house foundation)

   _____
   _____
   _____

2. ***Reasonable Use of Property** is jeopardized by the strict compliance with the provisions of the code. *(Give example for each tree such as the tree interferes with the house foundation or location of utilities)*.

   _____
   _____
   _____

3. Proposed vegetation removal, replacement, and any mitigation measures are **consistent with the purpose and intent of the code.** *(Give examples for each trees such as tree replacement proposed to mitigate for tree(s) removed)*.

   _____
   _____
   _____

4. The proposed request **will not be detrimental to the public welfare** or injurious to other property. *(explain why)*

   _____
   _____
   _____

_____ _____

Signature of Property Owner Date

* Answer question 1 or 2, as applicable

Tree Health Assessment

City of Redmond WASHINGTON

Tree Health Assessment Form must be completed by a certified arborist. One evaluation form per tree.

Site/Address: _____ **Map/Location:** _____ **Date:** _____

Arborist Name: _____ **Arborist Certification #:** _____ **Date of Last Inspection:** _____

I. Tree Characteristics

Tree # _____ **Species:** _____

DBH: _____ **# of Trunks:** _____ **Height:** _____ **Spread:** _____

Form: ☐ Generally Symmetric ☐ Minor Asymmetry ☐ Major Asymmetry ☐ Stump Sprout ☐ Stag-headed

Crown Class: ☐ Dominant ☐ Co-Dominant ☐ Intermediate ☐ Suppressed

Live Crown Ratio: _____% **Age Class:** ☐Young ☐ Semi-Mature ☐ Mature ☐ Over-Mature/Senescent

Pruning History: ☐ Crown cleaned ☐ Excessively Thinned ☐ Topped ☐ Crown Raised
☐ Crown Reduced ☐ Flush Cuts ☐ Pollarded ☐ None
☐ Cabled/braced ☐ Multiple Pruning Events Approximate Dates:_____

Special Value ☐ Specimen ☐ Heritage/Historic ☐ Wildlife ☐ Unusual ☐ Street Tree ☐ Screen
☐ Shade ☐ Indigenous ☐ Protected by Government Agency

II. Tree Health

Foliage Color: ☐ Normal ☐ Chlorotic ☐ Necrotic

Foliage Density: ☐ Normal ☐ Sparse **Epicormics?** Y N

Leaf Size: ☐ Normal ☐ Small **Twig Dieback?** Y N

Annual Shoot Growth: ☐ Excellent ☐ Average ☐ Poor

Woundwood Development: ☐ Excellent ☐ Average ☐ Poor ☐ None

Vigor Class: ☐ Excellent ☐ Average ☐ Fair ☐ Poor

Growth Obstructions: ☐ Stakes ☐ Wires/ties ☐ Signs ☐ Cables
☐ Guard ☐ Curb/Pavement ☐ Other: _____

Major Pests/Diseases: _____

III. Site Conditions

Site Character: ☐ Residence ☐ Commercial ☐ Industrial ☐ Park
☐ Natural ☐ Woodland/Forest ☐ Open Space

Landscape Type: ☐ Parkway ☐ Raised Bed ☐ Container ☐ Mound
☐ Lawn ☐ Shrub Border ☐ Windbreak

Irrigation: ☐ None ☐ Inadequate ☐ Adequate ☐ Trunk wetted ☐ Excessive

Recent Site Disturbance? Y N
☐ Construction ☐ Soil Disturbance ☐ Grade Change ☐ Line clearing ☐ Site Clearing

% Dripline paved: 0% 10-25% 26-50% 51-75% 76-100% **Pavement Lifted?** Y N

% Dripline with fill soil: 0% 10-25% 26-50% 51-75% 76-100%

% Dripline Grade Lowered: 0% 10-25% 26-50% 51-75% 76-100%

III. Site Conditions, Continued

Soil Problems: ☐ Drainage ☐ Shallow ☐ Compacted ☐ Droughty ☐ Saline
☐ Alkaline ☐ Acidic ☐ Small Volume ☐ Disease Center ☐ History of Fail
☐ Clay ☐ Expansive ☐ Slope _____ ☐ Aspect_____

Obstructions: ☐ Lights ☐ Signage ☐ Underground Utilities ☐ Line-of-Sight
☐ View ☐ Traffic ☐ Overland Lines ☐ Adjacent Vegetation ☐ _____

Exposure to Wind: ☐ Single Tree ☐ Below Canopy ☐ Above Canopy ☐ Recently Exposed
☐ Windward, Canopy Edge ☐ Area prone to windthrow

Prevailing Wind Direction: _____ **Occurrence of Snow/Ice Storms:** ☐ Never ☐ Seldom ☐ Regularly

IV. Tree Structure

ROOTS:

Suspected Root Rot: Y N **Mushroom/Conk/Bracket Present:** Y N **ID:** _____

Exposed Roots: ☐ Severe ☐ Moderate ☐Low **Undermined:** ☐ Severe ☐ Moderate ☐ Low

Root Pruned: _____ Distance from trunk **Root Area Affected:** _____%

Buttress Wounded: Y N **When:** _____ **Restricted Root Area:** ☐ Severe ☐ Moderate ☐ Low

LEAN:

_____ Degrees from vertical ☐ Natural ☐ Unnatural ☐ Self-corrected

Decay in Plane of Lean: Y N **Roots Broken:** Y N **Soil Cracking:** Y N **Soil Heaving** Y N

Compounding factors: _____ **Lean Severity:** ☐ Severe ☐ Moderate ☐ Low

CROWN:

Indicate presence of individual defect's location (root crown, trunk, scaffolds, branches) & rate their severity (S=severe, H=high, M= moderate, L= low)

Defect	Defect Area	Defect Severity	Defect	Defect Area	Defect Severity
Poor Taper			Decay		
Bow, Sweep			Cavity		
Co-Dominants, Forks			Conks/Mushroom/Bracket		
Multiple Attachments			Bleeding/Sap Flow		
Included Bark			Loose/Cracked Bark		
Excessive End Weight			Nesting Hole/Bee Hive		
Cracks/Splits			Deadwood/Stubs		
Hangers			Borers/termite/ants		
Girdling			Cankers/Galls/Burl		
Wounds/Seam			Previous Failure		

V. Risk Rating

Size of Defective Part ☐ 1 Point ☐ 2 Points ☐ 3 Points

1 Point	Parts less than **4 inches** in diameter
2 Points	Parts from **4 to 20 inches** in diameter
3 Points	Parts **greater than 20 inches** in diameter

Description & Comments: _____

Other Risk Factors ☐ 0 Points ☐ 1 Point ☐ 2 Points

This category can be used if professional judgment suggests the need to increase the risk rating. It can also be used if the tree is likely to fail before the next scheduled risk inspection.

V. Risk Rating, Continued

Description & Severity: _____

_____

Tree part most likely to fail: _____

Inspection period: _____ annual _____ biannual_____ other_____

Probability of Failure ☐ 1 Point ☐ 2 Points ☐ 3 Points ☐ 4 Points

Point	Risk	Description	Part Description
1	Low	Some minor defects	• Minor branch/crown dieback • Minor defects or wounds
2	Moderate	Several moderate defects present	• Indicators of advanced decay are found on 25-40% of circumference of any stem, branch, or root collar. • Shell thickness is >1 and <2 inches of sound wood for each 6 inches of stem diameter and stem has opening < 30% of stem circumference. • Stem has a single crack and decay • Roots within the area defined by the Critical Root Radius are less than or equal to 40% damaged, decayed, severed, or dead. • Branch union has included bark. • Canker or canker plus decay affect 25-40% of tree's circumference • Branch has a sharp bend or twist. • Large horizontal branch with several vertical branches on it.
3	High	Multiple **or** significant defects present	• Indicators of advanced decay are found on more than 40% of the circumference of any stem, branch or root collar. • Stem has advanced decay and the shell thickness is either less than 1 inch of sound wood for each 6 inches of stem diameter, or stem has opening greater than 30% of the stem circumference and shell thickness is less than 2 inches of sound wood for each 6 inches of stem diameter. • Stem is split in two by a crack or branch has a crack. • Stem segment has multiple cracks and decay. • Leaning tree with recent evidence of root lifting, soil movement or soil mounding. • Roots within the area defined by the Critical Root Radius are more than 40% damaged, decayed, severed, or dead. • Weak union is also cracked, cankered, or decayed. • Large epicormic branch on decaying stem. • Canker or canker plus decay affect more than 40% of tree's circumference. • Tree with excessive lean (more than 40%). • Leaning tree has a crack in stem or canker or decay on lower stem. • Leaning tree has a horizontal crack on the upper side of the lean and/or buckling bacrk and wood on lower side. • Any lodged branch. • Any dead tree, tree top, or branch.
4	Severe	Multiple **AND** significant defects present listed under "High" risk; visual obstruction of traffic signs/ lights or intersections	

Description & Comments: _____

_____

Total Risk Rating (Size of Part + Other Risk Factors + Failure Potential): _____

Risk Rating : ☐ Low (0-1 points) ☐ Moderate (2-3 Points) ☐ High (4-6 points) ☐ Severe (7-9 points)

VI. Risk Abatement

Prune: ☐ Remove Defective part ☐ Reduce end weight ☐ Crown clean ☐ Thin ☐ Raise canopy
☐ Crown reduce ☐ Restructure ☐ Shape

Cable/Brace: _____ **Inspect Further:** ☐ Root crown ☐ Decay ☐ Aerial ☐ Monitor

Remove Tree? Y N **Replace?** Y N **Other:** _____ **Effect on Adjacent Trees:** _____

Date: _____