



City of Rocklin

Planning Division
3970 Rocklin Road
Rocklin, California 95677
Phone (916) 625-5160 FAX (916) 625-5195

Oak Tree Removal Permit Application

The following information shall be submitted to the Rocklin Planning Department prior to the removal of any oak tree(s) six inches initial diameter or greater measured at breast height (Ordinance No. 676):

1. A plot/site plan of the lot showing the trees and buildings, driveways, utility lines, etc., in close proximity to the proposed tree(s);
2. An agent authorization form if the applicant is not the property owner;
3. A completed application form, and any other information as determined by the planning director to be necessary to evaluate the request.

Site Address

Assessor's Parcel Number

For Staff Use Only:			
Date of application	Received by	Field verification by	File Number
_____	_____	_____	_____

Please describe the condition of the oak tree(s) proposed for removal. (Attach arborist report, if applicable.)

Please give your reasons or objectives for removing the oak tree(s).

Number of oak trees to be removed: _____ Species of oak tree(s): _____

Number of trunks per tree: _____

Total diameter of oak tree(s) at breast height (TDBH): _____

Please check which mitigation you are requesting: Tree replacement Mitigation fund

I certify that if tree replacement is chosen as the form of mitigation, I will plant a total of _____ replacement trees of the genus _____ and species _____ on or before the date of ____ / ____ / _____. (Applicant's Initials) _____.

For Staff Use Only

Number of trees to be removed: _____ Total inches of Replacement: _____

Replacement mitigation selected. Number to be planted: _____

Mitigation fund selected. Fees collected: _____ (attach receipt)

Field Inspection of installed replacement trees performed by: _____

Date: _____

Comments: _____

THE TREE(S) DESCRIBED IN THIS APPLICATION IS/ARE APPROVED / DENIED FOR TREE REMOVAL BY THE COMMUNITY DEVELOPMENT DEPARTMENT.

Signature of Planning staff

Date

Applicant (Please Print)	Address	Phone Number	Signature
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Property Owner (Please Print)	Address	Phone Number	Signature
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Your signature authorizes the processing of this application by the applicant. (Provide owner's authorization letter if signature is other than property owner)



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SITE PLAN

Please use this form to create a plot plan showing tree(s) to be removed. Indicate trees, buildings, utility lines, and other relevant features. Show tree(s) to be removed with an "X" drawn through the tree(s).

A large, empty rectangular box with a thin black border, intended for the applicant to draw a site plan. The box is currently blank.