



CITY OF COVINGTON
Permit Services
 16720 SE 271st Street, Suite 100
 Covington, WA 98042
 Phone: (253) 638-1110
 Fax: (253) 638-1122
 www.ci.covington.wa.us

FOR STAFF USE ONLY

Permit Number: _____
 Application Date: _____

MINOR TREE REMOVAL PERMIT APPLICATION

Minor Tree Removal Permits are those permits involving removal of trees on lots greater than one acre and less than two acres in size, or on property or easements granted to public utilities, unless the activity falls within an exemption listed in CMC 18.45.050. in which case no permit is required.

Legal Property Owner Name(s): _____

Address/City/Zip: _____

Phone: _____ E-mail address: _____

Applicant Information (if different than owner)

Name/Company: _____

Contact: _____ Title: _____

Mailing Address/City/Zip: _____

Phone: _____ E-mail address: _____

Contractor Information

Name/Company: _____ State Contractor's License #: _____

Property Information

Address: _____ Parcel Number: _____

Current Land Use: _____ Current Zoning: _____

of Trees on Site: _____ # of Trees to be Removed: _____ When? _____

Project Description: _____

Explain why you wish to remove the trees: _____

Submittal Requirements

1. Completed application form, with one copy and appropriate fee;
2. The legal description or tax parcel number, and street address for the site;
3. Two(2) scaled site plans with property lines, adjacent streets, structures, north arrow, and date;
4. A tree inventory, identifying the species type, size, approximate height, location, and number of both existing trees and those specific trees to be removed;
5. A statement explaining the scope of work and time schedule for tree removal;
6. Information showing the location of existing and proposed improvements, if any, including but not limited to structures, roads, utilities, driveways and trails;
7. The approximate location of all critical areas and critical area buffers, and shoreline jurisdiction areas; and
8. Any other information, such as erosion and sediment control plans, if applicable, which the Director deems necessary and reasonable for an effective evaluation of the application for a minor tree removal permit.

NOTICE: All contractors performing work within the City must have a valid City business license.

I, the undersigned, do hereby certify that I am the owner/applicant and that all information contained above and in exhibits attached hereto is true and correct to the best of my knowledge and belief and is submitted for consideration by the City of Covington. In addition, I understand that acceptance of this application and fees do not constitute submittal of a valid application until so informed by the Administrator. Issuance of a permit does not authorize any work in public rights-of-way, City-owned property, utility easements, critical areas or any other areas or properties not specifically approved by the City. The granting of a permit or an approval does not presume to give authority to violate or cancel the provisions of any other federal, state or local laws.

 SIGNATURE OF OWNER/AUTHORIZED AGENT

 DATE