

TREE PRESERVATION PERMIT APPLICATION

Planning Department | City of Savage | 6000 McColl Drive, Savage, MN 55378 | Office: 952-882-2660

PROPERTY INFORMATION									
Site Address:									
Legal Description									
Property Identification Number(s):									
Name of Proposed Project:									
Lot or Parcel Size:		Square Feet:		Total Aci		Total Acre	es:		
Project Type (Check One	e): Tre	: Tree Removal Site Clearing Pruning of Trees in Right of Way C					n Right of Way 🔲 Other		
Site Clearing for:	Construction		Foundation A		on Ar	rea Only	Underbrush Only		
	Subdivision			Arterial Road			Collector Road		
Description of work to be performed under this permit:									
Type of Structure (i.e. walkout, ranch, etc.):									
Check One:	Residential Industr			rial	Commercial				
Reason for Removal:	Constru	Construction Hazard			us Location Dead/Diseased/Damaged O				
Method for Removal:	Cutting	ing Transplanting On-Site				☐ Transplanting Off-Site			
Estimated period of time for land alterations Start Da				te:	e: End Date:				
PROPERTY FEE OWNER INFORMATION									
Property Fee Owner(s):									
Mailing Address:									
City:				State:			Zip:		
Email:				Phone:					
APPLICANT INFORMATION									
Applicant:									
Mailing Address:									
City:				State:			Zip:		
Contact Person:				Office Phone:					
Cell Phone:				Email:					

SURVEYOR INFORMATION								
Company Name:								
Mailing Address:								
City:	State:	: Zip:						
Contact Person:	Phone:							
Cell Phone:	Email:							
SUBMITTAL REQUIREMENTS								
Please attach the following to the application: Certificate of Survey/Plat Plan showing the following: Size, species, condition and location on the land of all significant trees and specimen trees Type and location of lost significant trees Type and location of any trees saved Type and future location of replacement trees Location and type of protective devices to be used during construction to protect trees designated for preservation Certified Tree Inventory Designated Site Map showing: Material storage, debris disposal, vehicle parking, burn location and redi-mix truck wash-out sites								
ACKNOWLEDGEMENT OF RESPONSIBILITY								
By signing below, I certify that I am responsible for complying with all City Code requirements and the laws of the State of Minnesota with regard to this request. I certify the information I have supplied is true and correct to the best of my knowledge and my application submittal is complete. I further understand that additional information may be required for analysis of this request and I agree that any additional costs incurred by the City will be my responsibility.								
Applicant Signature(s):			Date:					
Fee Owner Signature(s):			Date:					
NOTES		FE	ES					
	Applica	Application Fee: \$20						
	Total Amo	Total Amount Due:						
FOR CITY USE ONLY								
		DATE ISSUED:						
City Forester Signature:	Date:	PERMIT NO:						