

## APPLICATION FOR DECLASSIFICATION OF LANDMARK TREE(S)

## APPLICANT INFORMATION

Name:		
Date:		Tel:
Address:		
E-mail Address		
Organization represented:		
Т	REE INFO	RMATION
Landmark Tree Number(s):		
Resolution Number:		
Address of tree(s):		
Assessors Parcel Number:		
Pending Project Application Number, if	applicable:	
JUSTIFICATION STATEMENT		
*Please attach all supporting information, including historical documentation, arborist or		
environmental reports, etc. to this	form.	
	VNER INFO	ORMATION
Property owner name:		
Property owner address:		
Property owner telephone:		
		specified in this application or am authorized and empowered ing to this application. I consent to the application for this
nomination.	an matters relati	ing to this application. Teolisent to the application for this
Signature:		Date:
	STAFF US	SE ONLY
Application Number:		Date:
City Council Action: Ap	proved $\square$	Denied □
Resolution Number:		
Applicant Signature:		Date: