

Building/Zoning Department 301 Coleman Avenue Waveland, MS 39576 (228)466-2549 (228)467-5177 FAX

Protected Tree Removal Permit Application

APPLICANT NAME:				
LEGAL	DESCRIPTION OF PROPERTY:			
ADDRE	SS:			
CITY: _		_STATE:	_ZIP:	
PHONE	#:E-MAIL:			
TYPE O	F TREE OR TREES: Live Oak growing within the City of Waveland	l with a trunk size of m	ore than eighteen	
	(18) inches in diameter measured at a point three (3) feet above ground level or; Magnolia tree growing within the City of Waveland with a trunk size of more than eight (8) inches in diameter measured at a point three (3) feet above the ground level.			
REASO	N FOR REMOVAL:			
☐ The tree or trees proposed to be cut are in such poor health or bad physical condition			physical condition as	
	to be a hazard to human safety; or Construction cannot be practically located in	such a way as to presε	erve the tree or trees.	
PLEASE	PROVIDE THE FOLLOWING:			
	A scaled site plan showing the tree or trees lo A photograph of the tree or trees.	cation on the propert	y.	
	A report from a certified and licensed Arboris of the tree as well as any recommendations roon the property. In some cases, it may be req Arborist in Mississippi be submitted.	egarding the tree or o	ther affected trees	
	A warranty deed for the property or the tax a	ccessor's website has	applicant's name.	
otherwise	ition to the granting of a tree removal permit, the applicant shal be destroyed to another location upon the site; or to replace the ent trees elsewhere within the site determined by the Building C	ose protected trees which will	be destroyed with suitable	
ADDITIONAL SIGNATURE:		DATE		

COMMENTS:	
ZONING APROVAL:	DATE:
CITY ARBORIST APROVAL:	DATE:
BUILDING OFFICIAL APROVAL:	DATE:

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