



Living up to our name.

For Office Use Only:
Permit No. _____
Date Received _____
Fee Required _____
Payment Received _____

Tree Permit

Parks, Recreation, and Forestry
1316 N. 14th Street, Suite #200
City of Superior, Wisconsin

- Planting**
- Removal**
- Maintenance** – Any use of pesticides requires an Exemption Request Application
- Special Use (specify in comments)**

Applicant Name: _____ Phone #: _____

Contractor Name and License Number (if applicable): _____

Address, Phone: _____

Description of tree(s) to receive work (location, species, diameter, number) and date work is scheduled to take place.

SPECIAL CONDITIONS:

1. This permit is subject to all rules and regulations pertaining to the Code of Ordinances, City of Superior, Wisconsin, Chapter 90 Parks and Recreation, Article IV Trees and Shrubs, Division 4 Permits and Licenses, Sec. 90-240 Permits required.
2. All trees must be planted according to the *City of Superior's Tree Planting Standards*. See the *Recommended Street Trees* list and for important information on planting in the urban forest.
3. All work shall be completed at the applicant's expense, including clean up and removal of all debris.
4. Standard safety precautions of the tree care industry are to be adhered to at all times. ANSI Z1133.1
5. Traffic control is the responsibility of the applicant and their contractor. All lane closures and restriction require a minimum of a 24-hour notice to Public Works at 715-395-7334.
6. This permit is valid for 90 days from the issued date.
7. Any person requesting removal of a tree that is otherwise determined to be a healthy tree by the City's Certified Arborist may be required to pay \$50/inch diameter to aid in the replacement costs of the tree canopy in the City of Superior.
8. The applicant shall be responsible for contacting Diggers Hotline at 1-800-242-8511, Verification #_____.
9. The City assumes no liability in connection with this action.
10. Please contact the City's Certified Arborist for final inspection of work upon completion. 715-715-395-0268.

I hereby certify that I am the owner of the subject property or I have been authorized by the owner(s) of the property to represent this application, and that I have read and examined this application and know the same to be true and correct. All provisions of law and ordinances governing this type of work will be met whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.

I understand that the City of Superior may revoke, annul or terminate this permit if applicant fails to comply with any or all of its provisions, requirements or regulations as herein set forth or through willful or unreasonable neglect, fails to heed or comply with notices given.

Signature of Applicant

Date

Superior is proud to be celebrating its 22nd Year as a Tree City USA!

For Office Use Only:
Permit Approved City Arborist or
Forester Signature: _____
Date: _____