



City of Dickinson Community Development

Tree Removal Application

Property Information

Address: _____
 County Appraisal District No.: _____
 Legal Description: _____
 Acres: _____ Floodplain: _____

Property Owner Information

Owner: _____
Last First M.I.
 Address: _____
Street Address Apartment/Unit #

City State ZIP Code
 Phone: _____ Email: _____

Contractor Information

Contractor Type: _____
 Company: _____
 Contact: _____
Last First M.I.
 Address: _____
Street Address Apartment/Unit #

City State ZIP Code
 Phone: _____ Email: _____

**** Separate Contractor Registration required ****

Applicant / Agent Information

Applicant: _____
Last First M.I.
 Address: _____
Street Address Apartment/Unit #

City State ZIP Code
 Phone: _____ Email: _____

Details of Request

Total area to be cleared (SF): _____ Total to be removed (inches): _____

Number of Qualifying Trees on Property: _____ Number of Significant Trees on Property: _____

Number of Qualifying Trees to be Removed: _____ Number of Significant Trees to be Removed: _____

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge. By my signature, I hereby affirm that I am the **property owner** of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is **complete and accurate**, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's Fee Schedule. This (FEE) is **non-refundable** even in the event of application withdrawal. I have the power to authorize and hereby grant permission for **City of Dickinson Officials** to enter the property on official business as part of the application process.*

Signature: _____ Date: _____

Printed Name: _____

Staff Use Only

Date Received: _____ Permit Number: _____

Plan Review Fee: _____ Date Paid: _____

Permit Fee: _____ Date Paid: _____

Tree Removal Requirements Checklist

The following list of submittal requirements shall be used by the applicant as a checklist in preparing a complete application. Applications that do not have these items will be rejected and returned to the applicant. Additional information is found in Chapter 16.10 the Dickinson Code of Ordinances.

Merge/Combine the following files together, facing the correct direction and name the file:
Tree Removal (Address of Request)

- Application – complete with signature.
- Tree Survey – that includes all trees greater than 10” in diameter; include:
 - Type of Trees
 - Diameter of Trees
- Site Plan – showing location of **all structures** to be placed on the property.
- Fees – The following fees have been adopted by City Council and are periodically changed. All fees are non-refundable. The zoning official, commission, or city council may require technical studies (engineering, noise, traffic, impact, etc.). The cost for these studies is borne by the applicant. Before submitting payment, please contact Community Development to confirm appropriate payment amount.
 - \$150.00 Application, PLUS
 - Plan Review Fee; PLUS
 - \$50.00 0-4 acres
 - \$200.00 5-19 acres
 - \$350.00 20-99 acres
 - \$500.00 99+ acres
 - Tree Removal Fees (in diameter):
 - \$50.00 10” – 19”
 - \$250.00 20” – 29”
 - \$500.00 30” +
- Authorization:
 - Ownership – submit county appraisal information verifying ownership. If county appraisal information is not correct, submit deed.
 - Agent Authorization – if you are an agent and not the property owner, submit a notarized statement from the owner naming you as agent for this application.
 - Signatory Authorization – if the property is owned by any entity or corporation and not an individual, submit Articles of Incorporation or other official documentation verifying signatory authorization.

* *You May Email Application with Documentation to:* permits@dickinsontexas.gov