

# RESIDENTIAL TREE FELLING

PRICE OF CERTIFICATE : Free

## ADMINISTRATION USE ONLY

Date of the application and request number	Date :	Request number :	
Number	Lot :	Zone :	Role :

## IDENTIFICATION OF THE SITE

Address of the works or lot	
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## IDENTIFICATION OF THE OWNER OR APPLICANT

Name			
Address			
Town and postal code :	Town :	Postal code :	
Phone number	Home :	Cell:	
Email			
Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No *A power of attorney from the owner is required.		

## CONTRACTOR OR WORK SUPERVISOR

Work supervisor	<input type="checkbox"/> Applicant <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Other :		
Name of the company			
Name of contractor			
Address			
Town and postal code :	Town :	Postal code :	
Phone number	Office :	Cell:	
Business number of Régie du bâtiment number	NEQ :	RBQ :	

## DEADLINE AND VALUE OF THE WORK

Starting date	
Ending date	
Value of work	

**DETAILS OF THE WORK**

Number of tree(s)	Species	Raison de l'abattage	Localisation
	<input type="checkbox"/> Hard wood <input type="checkbox"/> Number : _____ Soft wood Number : _____	<input type="checkbox"/> Ash (beetle) <input type="checkbox"/> Dead <input type="checkbox"/> Sick <input type="checkbox"/> Damaging <input type="checkbox"/> Other : _____	<input type="checkbox"/> Front yard <input type="checkbox"/> Back yard <input type="checkbox"/> Left lateral yard <input type="checkbox"/> Right lateral yard
Endroit où le ou les arbres seront replanté (si applicable)	<input type="checkbox"/> Front yard <input type="checkbox"/> Back yard <input type="checkbox"/> Left lateral yard <input type="checkbox"/> Right lateral yard		

**DOCUMENTS REQUIRED**

- Signed permit application form
- Power of attorney signed by the owner allowing the applicant to apply on their behalf if the applicant is not the owner If applicable
- Written authorization from the neighbor must be attached if the tree is located on a shared property line
- Location of trees to be cut on a map
- Photo(s) of the tree, its trunk, and its crown.
- Photographs/illustrations/any equivalent visual

*Other documents may be required depending on the case. A missing document will prevent the application from being processed.*

**DECLARATION**

The undersigned declares that the above information is accurate and complete and undertakes to submit all documents required for this application. The undersigned also declares that they have read and understood the applicable municipal procedures and regulations. Finally, the undersigned understands that this form does not constitute a permit or certificate of authorization.

I acknowledge that I have received all the information necessary to give my free, clear, and informed consent for the collection of my personal information.

Signature : \_\_\_\_\_

Date : \_\_\_\_\_

**Note :** The official responsible for the file has **45 days** (if the application is compliant), depending on the nature of the proposed work, calculated from the time the application is substantially complete for municipal review, to respond to the application. (Urban Planning Bylaw Administration Regulation RU-901-2014, sections 54 and 73).