Office of Planning and Zoning

Tree Removal Permit

Exemptions – Please see Tree Removal Exemption form.

Owner's Name_____Phone _____

Owner's Address (Mailing) _____

Applicant/Agent Name_____Phone _____

Applicant/Agent Address (Mailing) _____

Project Name (if applicable) _____

Project Physical Location _____

Zoning_____Section_____Township_____Range_____Alt. Key # _____

Subdivision /Phase_____Block_____Lot _____

Type of Development: _____

Submittal Information

A tree inventory, including an aerial photograph or drawing at a scale of one inch equals two hundred feet (1" = 200) or a greater legible scale, if needed, showing:

- Property boundaries, type of trees being proposed for removal, number of trees and size of trees.
- All protected trees that are proposed for removal.
  The following trees and palms are designated protected trees:
  - All trees and palms native to Florida or Florida Friendly (for listing go to https://ffl.ifas.ufl.edu/resources/apps/plant-guide/), three inches or larger in diameter at breast height.
  - Sand Pine and Xeric Oak Scrub community trees two inches diameter or larger at breast height.
  - Wetland trees of any size.
  - Historic, Specimen, and Heritage trees.
- Preserved trees and/or remaining forested areas can be generally noted.
  - Location, caliper and common name of individual trees or tree groupings
  - Location and caliper of Historic, Specimen or Heritage Trees
- General schedule of when the trees will be removed and when replacement trees will be planted.
- Mitigation plan, if required, indicating location, size and species of trees used as replacements.

Reason for tree removal:_____

Owner/Applicant Signature:_____Date:_____

Application Fee:	$290.00 $725.00 after the fact (subdivision/site plans/nonresidential) development
Tree Removal Fee:	$50.00 per tree (maximum residential $1,450 and maximum commercial $12,000)
After the Fact:	$100.00 after the fact per tree (maximum residential $2,900) and maximum commercial $25,000)
Mitigation Fee:	$110.00 per every 2.5 caliper inches of the total caliper tree inches not being replaced unless it falls under LDR 9.02.06(C)(2). (See Ratio on next page).

Notes: This site could be subject to inspection by County staff. This permit expires 12 months after issuance.
Total caliper of protected trees removed or to be removed:

TREE TYPE	# of Trees	Caliper Total (CT) inches	*Mitigation Percentage	*Equivalent Mitigation Fee
Three inch (3") & Specimen			CT x .50 =	
Sand Pine and Xeric Oak min. 2"			CT x .50 =	
Wetland Tree of any caliper			CT x .50 =	
Historic & Heritage Tree(s)			CT x 1.0 =	
Clearing without a Permit Specimen & Heritage			Ratio – 2 .5 Trees to 1.0 Tree =	
Three or more trees			Ratio – 2.0 Trees to 1.0 Tree =	
TOTAL				

To measure Caliper (Trunk Diameter), measure the tree trunk at 4.5 feet above the ground.

To be completed by staff only

TRP#_____ Address #_____

Tree Removal Permit: Approved_____ Denied_____Permit Expiration Date: _____

Comments or Conditions: _____

_____

_____

_____

_____ _____
Staff Name and Signature Date

Inspection

Inspection Date: _____ Approved_____ Denied _____

Comments or Conditions: _____

An applicant may choose to provide the mitigation through either tree replacement OR mitigation fee.

Fees	Amount	Total
Application fee	$290.00 or $725.00 (ATF)	
Tree Removal – Residential Lot	$50 per tree (maximum $1,450)	
Tree Removal – Non-residential/Subdivisions	$50 per tree (maximum $12,000)	
Tree Removal – After the Fact Residential Lot	$100 per tree (maximum $2,900)	
Tree Removal – After the Fact Non-residential/Subdivisions	$100 per tree (maximum $25,000)	
Mitigation (if required)	$110.00 per every 2.5 caliper inches	
	Total Fees Paid:	

Office of Planning and Zoning

Agent Authorization Form

I/we, (print property owner name(s))_____, as the property owner(s) of the real property described as follows,_____, do hereby authorize_____(print agent's name) to act as my/our agent, to execute any petitions or other documents necessary (excluding impact fee deferral agreements) to affect the application approval requested and more specifically described as follows, _____ _____, and to appear on my/our behalf before any administrative or legislative body in the County considering this application and to act in all respects as our agent in matters pertaining to the application. I/we hereby grant permission for staff to conduct a site visit in conjunction with this application.

Signature	Print Name of Property Owner	Date

Signature	Print Name of Property Owner	Date

State of Florida

County of Lake

Sworn to (or affirmed) and subscribed before me by means of □ physical presence or □ online notarization, this _____day of_____, 20____, by _____ _____.

Personally Known OR Produced Identification

Type of Identification Produced _____

_____

Notary Signature

(SEAL)

Legal Description(s), Alternate Key Number(s), or Physical Address is required:
Alternate Key or Physical Address:
Legal Description:

NOTE: All Applications shall be signed by the Owner(s) of the Property or some person duly authorized by the Owner to sign. The authority authorizing such person other than the Owner to sign must be attached.