CITY OF RIVERGROVE
PO Box 1104 - Lake Oswego, Oregon - 97035
503.639.6919 – Fax 503.624.8498
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Tree Removal Permit Application

Please attach Arborist's Report and Permit Fee, if applicable.

Date of Request: _____ Is this an emergency? YES:____ NO:_____

Name of Property Owner:_____

Address:_____

Phone Number:_____ E-mail Address_____

How many trees are your requesting for removal?_____ How large are the tree(s)? (circumference, as measured 4.5 feet from the ground):_____

What is/are the species? _____

_____

_____

Is this tree dead, dying, or dangerous? _____ If dying or dangerous, do you have an arborist's report? _____ If so, please attach.

Please describe their location on the property, why the trees are being removed and any emergency situation:

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