

TREE TRIMMING PERMIT

CITY OF HIAWATHA, 701 OREGON, HIAWATHA, KS 66434

(785) 742-7417

Name: _____ Date: _____

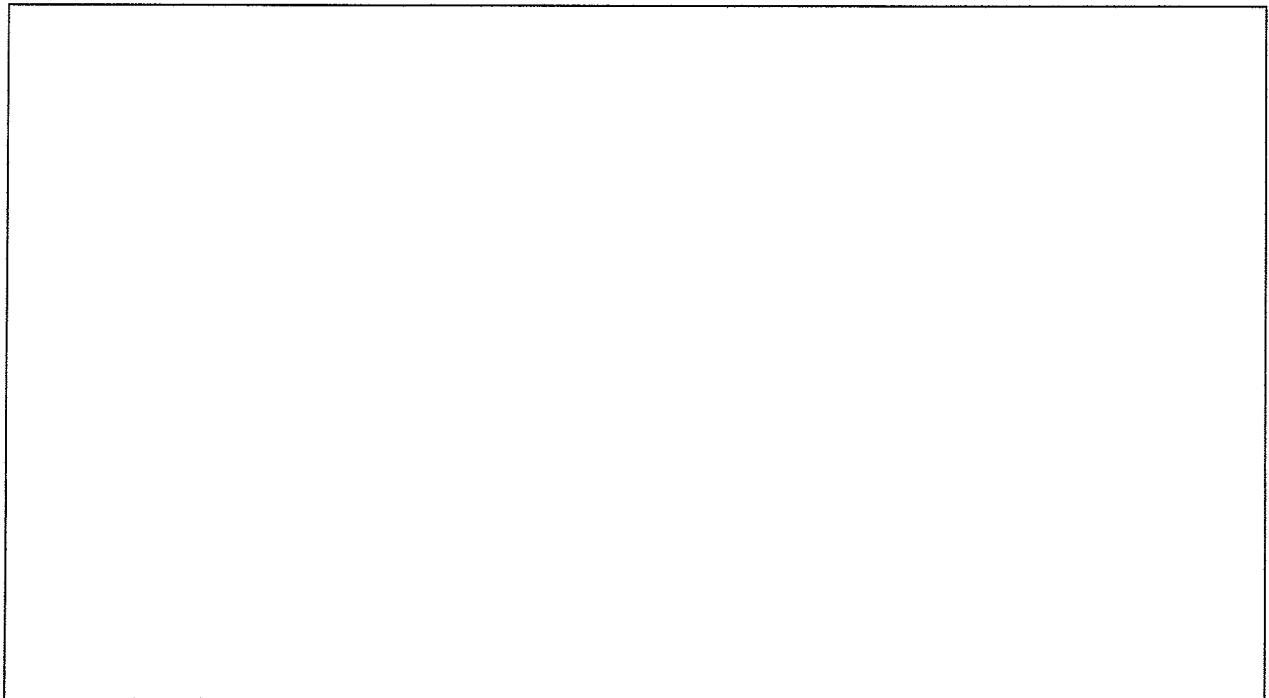
Address: _____

Phone: _____

Type of Tree: _____

Reason for Trimming: _____

Please draw a rough sketch of the property and where the tree is located in relation to property lines and abutting streets.



City Authorized Representative: _____

Property Owner Notified Date of Notice: _____

Authorization obtained from:

Approval from the Governing Body Date of Approval: _____

Approval from the City Tree Board Date of Approval: _____