

City of Greensburg
416 S. Main Street
Greensburg, PA 15601

SHADE TREE PERMIT APPLICATION

Completed application should be returned to the: City Administration Office, Room 101

Property Owner's Name: _____

Address: _____

Phone: _____ Date: _____

Please be advised, debris from tree removal and trimming by a contracted service is to be hauled away by the contractor performing the work. This portion of the application may be filled out by the property owner or by the contractor performing the work:

Contractor (if applicable): _____ Phone: _____

Tree Description (Include Species) and Exact Location: _____

Action Desired (particular type of work, i.e. trimming, tree removal, planting, etc.) _____

If tree removal, please provide justification for removal:

Proposed work date(s): _____

As noted hereon by the City Administrator, any conditions noted below must be strictly observed in consideration of approval:

The above action is : Approved _____
Disapproved _____

by _____ Date: _____
Susan M. Trout, City Administrator

Reference: Chapter 74 of Ordinance No. 1646, the Code of the City of Greensburg. Any questions may be directed to the City Administration Office, 724-838-4324.