



CITY OF GREENSBURG

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SHADE TREE PERMIT APPLICATION

Property Owner's Name: _____

Address: _____

Phone: _____ Date: _____

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: _____
Kelsye Hantz, 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.

February 9, 1799