



CITY OF LACEY
 Community & Economic Development Department
 420 College Street SE
 Lacey, WA 98503
 (360) 491-5642

OFFICIAL USE ONLY
Case Number: _____
Date Received: _____
By: _____
Related Case Numbers: _____ _____
Referred to Tree Protection Professional on: _____

**REQUEST FOR REVIEW BY
 TREE PROTECTION PROFESSIONAL**

I would like to have the trees on my property reviewed by the city's Tree Protection Professional.

Address of Property: _____

Assessor's Tax Parcel Number: _____

Property Owner's Name: _____

Mailing Address: _____

City, State, Zip: _____

Daytime Telephone: _____

Size of Lot: _____ Number of Existing Trees: _____

Number of Trees to be Removed: _____ (Cannot exceed five trees in 36 months)

I understand that the cost of this service will be paid by me at the rate of \$80 per hour, **see table below for exceptions**. I understand that the cost of this service is in addition to any normal permit fees.

Applicant	Forester's Recommendation	Party Responsible for Payment
Homeowner	Minimum of one tree defined as hazard tree (LMC 14.32.060(I))	City
Homeowner	No trees analyzed that would meet definition of hazard tree	Homeowner
Homeowner's/Condo Owner's Association	Minimum of one tree defined as hazard tree	City
Homeowner's/Condo Owner's Association	No trees analyzed that would meet definition of hazard tree	Homeowner's Association
Commercial (Including Multifamily)	Any	Commercial

 Applicant's Signature

 Date