



SEMINOLE COUNTY
PLANNING & DEVELOPMENT DIVISION
 1101 EAST FIRST STREET, ROOM 2028
 SANFORD, FLORIDA 32771
 TELEPHONE: (407) 665-7371
 PLANDESK@SEMINOLECOUNTYFL.GOV

PROJ. #: _____

ARBOR/LOGGING PERMIT

APPLICATION TYPE/FEE (SELECT ONE)

- ARBOR PERMIT** \$75/ACRE ROUNDED UP (\$500 MAX. FEE)
- LOGGING PERMIT** \$75/ACRE ROUNDED UP (\$500 MAX. FEE)
- FINAL ENGINEERING/SITE PLAN/SMALL SITE PLAN (CONCURRENT)** \$0 (ARBOR FEE INCLUDED W/ APPLICATION FEE)

NOTE: DEVELOPED SINGLE FAMILY LOTS OF 5 ACRES OR LESS DO NOT REQUIRE A PERMIT FOR TREE REMOVAL

APPLICANT/CONSULTANT

NAME:	COMPANY:	
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE:	EMAIL:	

PROJECT

PROJECT NAME OR ADDRESS:		
PARCEL ID #(S):		
LOCATION(S) OF TREE(S):		
ACREAGE:	ZONING:	
TREE SPECIES:	SIZE:	NUMBER TO BE REMOVED:
REASON FOR TREE REMOVAL:		

REQUIRED ATTACHMENTS FOR REVIEW

- Application for tree removal (Arbor Permit)**
- Written statement on reason for removal**
- Tree preservation statement for tree protection during construction (if applicable)**
- Site Plan**

 SIGNATURE OF OWNER/AUTHORIZED AGENT

 DATE

ADDITIONAL INFORMATION

Site Plan Requirements:

- Location of existing/proposed improvements and or structures
- Proposed changes in elevations, site grading or major contours
- Location of existing or proposed utility easements
- Location of all trees on site that is greater than 3" in diameter measured 4 ½" above the ground
- Designating the trees to be retained, removed, relocated, or replaced.
- Legend for trees to be removed
- Required mix of replacement trees: see Sec 60.22 Table Mix of Species
- Replacement stock: see Replacement Tree Species List sheet or Sec 60.23

Typical granting of Arbor Permits:

- Tree is located in buildable area or right-of-way where structure will go and/or it unreasonably restricts the permitted use of the property.
- Tree is diseased or injured, in danger of falling on pedestrians or endangering structure.
- Tree interferes with utility services or creates an unsafe visions clearance.
- Tree is diseased or infested, remove to prevent transmission of disease or infestation.
- Tree needs to be removed for agricultural purposes.

OFFICE USE ONLY

APPROVED (PERMIT SHALL EXPIRE 1 YEAR FROM DATE OF APPROVAL)

DENIED

CONDITIONS: _____

REPLACEMENT TREES REQUIRED: **YES** **NO** NUMBER OF REPLACEMENT TREES: _____

All replacement trees shall be 2" caliper and 8' height at time of planting and Florida Nursery grade Number 1. See Replacement Tree Species List sheet or Sec. 60.23 SCLDC for preferred tree species.

REVIEWED BY: _____ TITLE: _____

REVIEW DATE: _____ TELEPHONE NUMBER: (407) 665- _____

ARBOR/LOGGING PERMIT

REPLACEMENT TREE SPECIES LIST Sec. 60.23

Preferred Tree Species List

- (1) American Elm (*Ulmus americana*);
- (2) American Holly (*Ilex opaca*);
- (3) American Hornbeam (*Carpinus caroliniana*);
- (4) Box Elder (*Acer negundo*);
- (5) Bald Cypress (*Taxodium distichum*);
- (6) Carolina Basswood (*Tilia americana* var *caroliniana*);
- (7) Dahoon Holly (*Ilex cassine*);
- (8) Devilwood (*Osmanthus americanus*);
- (9) Laurel Oak (*Quercus laurifolia*);
- (10) Live Oak (*Quercus virginiana*);
- (11) Loblolly Bay (*Gordonia lasianthus*);
- (12) Loblolly Pine (*Pinus taeda*);
- (13) Longleaf Pine (*Pinus palustris*);
- (14) Persimmon (*Diospyros virginiana*);
- (15) Pignut Hickory (*carya glabra*);
- (16) Pond Cypress (*Taxodium ascendens*);
- (17) Pond Pine (*Pinus serotina*);
- (18) Red Bay (*Persea borbonia*);
- (19) Red Maple (*Acer rubrum*);
- (20) Sand Live Oak (*Quercus geminata*);
- (21) Scrub Holly (*Ilex opaca*);
- (22) Silk Bay (*Persea humilis*);
- (23) Slash Pine (*Pinus eliottii*);
- (24) Southern Magnolia (*Magnolia grandiflora*);
- (25) Southern Red Cedar (*Juniperus silicicola*);
- (26) Swamp Tupelo (*Nyssa sylvatica biflora*);
- (27) Sweetbay (*Magnolia virginiana*);
- (28) Sweetgum (*Liquidambar styraciflua*);

- (29) Sycamore (*Platanus occidentalis*);
- (30) Tulip Tree (*Liriodendron tulipifera*);
- (31) Turkey Oak (*Quercus laevis*); and
- (32) Winged Elm (*Ulmus alata*).

Acceptable Tree Species List

- (1) Carolina Ash (*Fraxinus caroliniana*);
- (2) Carolina Laurel Cherry (*Prunus caroliniana*);
- (3) Eastern Cottonwood (*Populus deltoides*);
- (4) Hackberry (*Celtis laevigata*);
- (5) River Birch (*Betula nigra*);
- (6) Shumard Oak (*Quercus shumardii*);
- (7) Swamp Bay (*Persea palustris*);
- (8) Myrtle Oak (*Quercus myrtifolia*); and
- (9) Sand Pine (*Pinus clausa*).

OWNER AUTHORIZATION FORM

An authorized applicant is defined as:

- The property owner of record; or
- An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or
- Contract purchaser (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed).

I, _____, the owner of record for the following described property (*Tax/Parcel ID Number*) _____ hereby designate _____ to act as my authorized agent for the filing of the attached application(s) for:

<input type="checkbox"/> Arbor Permit	<input type="checkbox"/> Construction Revision	<input type="checkbox"/> Final Engineering	<input type="checkbox"/> Final Plat
<input type="checkbox"/> Future Land Use	<input type="checkbox"/> Lot Split/Reconfiguration	<input type="checkbox"/> Minor Plat	<input type="checkbox"/> Special Event
<input type="checkbox"/> Preliminary Sub. Plan	<input type="checkbox"/> Site Plan	<input type="checkbox"/> Special Exception	<input type="checkbox"/> Rezone
<input type="checkbox"/> Vacate	<input type="checkbox"/> Variance	<input type="checkbox"/> Temporary Use	<input type="checkbox"/> Other (please list):

OTHER: _____

and make binding statements and commitments regarding the request(s). I certify that I have examined the attached application(s) and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments, and fees become part of the Official Records of Seminole County, Florida and are not returnable.

Date

Owner's Signature

Owner's Printed Name

STATE OF FLORIDA
COUNTY OF _____

SWORN TO AND SUBSCRIBED before me, an officer duly authorized in the State of Florida to take acknowledgements, personally appeared _____, who is personally known to me or who has produced a _____ as identification and who executed the foregoing instrument and sworn an oath on this _____ day of _____, 20____.

Notary Public