

# Incorporated Village of Malverne

99 Church Street • Malverne, NY 11565-1726 • Phone: 516-599-1200 • Fax: 516-599-0613

## TREE REMOVAL PERMIT APPLICATION

**Private Property**

**Fee: \$25.00**

Date: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Name of Tree Removal Company: \_\_\_\_\_  
(Company must be licensed by Village of Malverne)

Number and Type of Tree(s) to be Removed: \_\_\_\_\_

Reason for Removal: \_\_\_\_\_  
Is removal related to construction? YES / NO

Location of Tree(s) (Attach **PHOTOS** or Complete attached tree plan) Size of Tree (Diameter) \_\_\_\_\_

Are you Planning to Replace Removed Tree? YES (indicate type of tree) \_\_\_\_\_ / NO  
I understand that if I select a replacement tree from the list of suitable trees maintained by the Village (below) and plant on the curb strip/front lawn, that the Village shall pay a portion of the cost of the new tree and replacement, if done by the Village.

**INDICATE 1<sup>st</sup> and 2<sup>nd</sup> Choice: (descriptions can be found at <https://www.malvernevillage.org/committees-boards>)**

Street/Curb Friendly: \_\_\_\_\_ Little Leaf Linden \_\_\_\_\_ Zelkova \_\_\_\_\_ Hardy Rubber Tree

Wire Friendly: \_\_\_\_\_ Golden Rain \_\_\_\_\_ Hedge Maple \_\_\_\_\_ Amur Maple

I certify I am the property owner/representative authorized to make this application and that all statements contained are true and that all work shall conform to the current NYS Residential, Building, Fire, Existing Building, Property Maintenance and all Village Ordinances for which this permit is issued. No work is to be performed until a permit has been issued by the Incorporated Village of Malverne. I agree to hold harmless the Village of Malverne, its agents, officers, and employees for any damage or injury caused by reason of planting, placement, maintenance, or removal of trees.

**Signature of Applicant:** X \_\_\_\_\_  
*Sign in presence of a Notary Public*

*Notary Acknowledgement:*

*State of New York*

*County of Nassau*

*Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_*

*Notary Signature* \_\_\_\_\_

*Seal:*



**Village Time/Date Stamp**



*(For Office Use Only)*

*4/1/21*

DATE: \_\_\_\_\_  Granted  Denied

Reason/Conditions: \_\_\_\_\_

Reviewed By: \_\_\_\_\_