Tree Permit #: TR/NC_____



TOWN OF SEVEN DEVILS TREE REMOVAL/NEW CONSTRUCTION

SEVEN DEVILS PROPERTY LOCATION:	
ADDRESS:	
PHONE:	
CONTRACTOR:	PHONE:
SIGNATURE*:*By signing the permit, the above unders the above is subject to a fine.	tands that if any information is incorrect and/or changes,
Purposed of Requested Permit:	
MARKED WITH TAPE. C • All corners of building • Footprint of building • Footprint of drivew • Footprint of parking • Footprint of septic t Note: Once permit is applied for	g ay
# of trees marked:	(To be filled in by Zoning Administrator)
Permit Approved:	Not Approved:
Method of brush removal:	
Zaning Administrator	Data