

ORANGE COUNTY ZONING DIVISION

201 South Rosalind Avenue, 1st Floor, Orlando, Florida 32801 Phone: (407) 836-3111 Email: ZoningInternetMail@ocfl.net www.orangecountyfl.net

Application – Tree Removal (Developed Property)

This Application shall be used for individual tree removals on developed property only. Be aware that a mitigation plan may be required during the review process.

All Sections cited on this application are found in Ordinance 2001-19 (Sec. 15-276 thru Sec. 15-306 of the Orange County Code).

A Zoning review fee in the amount of \$80.00 is due at time of Application. Make checks payable to the 'Board of County Commissioners' or complete a Credit Card Authorization form.

If additional departmental reviews are deemed necessary by Zoning staff after their initial site visit, additional review fees will apply and will be due upon permit issuance.

Applicant's Name

Allow up to 14 days for a complete permit review.

The approved permit will be valid for 60 days from date of issuance.

You may submit In-Person, Fax (407) 836-9611, or online to ZoningInternetMail@ocfl.net.

General Information:

Owners Name

Owners Ivallie.	Applicant 8 Ivame.
Project Address:	
	Owner's Email:
Owner's Address:	
	Applicant's Email:
Applicant's Address:	
Project Information:	
Project Start Date:	
Briefly Describe the reason for the reason	moval:
<u>*</u>	s associated with a Building or Zoning Division permit, please provide the permit will not be issued until those permits are issued.
Building Permit Number:	

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Attach a site map indicating the location of trees slated for removal and complete the information below.	
Species / # to be removed / Diameter(s) /	Reason for removal:
How will the tree(s) be slated for remova	l be identified for pre-inspection purposes?
Note: If the trees are not identified at time application and payment in order for another states.	ne of the site inspection, the applicant will be required to file a new ther inspection to occur
APPLICANT CERTIFICATION (Ow	ner OR Applicant acting as Owner's Representative)
I hereby certify that to the best of my knowledge and belief, all information supplied with this application is tru	
and accurate. I also understand that any v	riolation of Section 15-281 of the Arbor Ordinance (2001-19) requires
payment of fine and/or other mitigation r	neasures.
Signature:	Date:
Print Name:	Title:

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