

Holly Forest Association

Tree Cutting Permit Application		Received By:	Da	ate Received:
Date sent to ECC:		ECC Approval Date:	Fee Amount:_\$	
Applicant Information				
Full Name:	Last	First	<i>M.I.</i>	Date:
Physical	Last	7 // 51	<i>WI.</i> 1.	
Address:	Street Address (ADDRESS TO PR	OPERTY WHERE TREES ARE LOCATED)		PO Box #
	SAPPHIRE		NC	28774
	City		State	ZIP Code
Phone:		Email		
Property Information				
Parcel Num	ber:	Section: Lot:		
Purpose of Cutting Trees and Number of Trees to be cut <u>(PLEASE PROVIDE AS MUCH DETAIL AS POSSIBLE TO</u> EXPEDITE THE PROCESS):				
Are the tree	s tagged?	YES NO		
How are the	y tagged (describe below):			
		Disclaimer and Signature		
By sianina	below, I acknowledge an uno	lerstanding of the followina:		
- With the submittal of a completed application and any required supplemental information, the ECC will				

- with the submittal of a completed application and any required supplemental information, the ECC will conduct an inspection, and upon determining whether the trees meet the eligibility criteria, will provide written approval of the application. <u>A PERMIT WILL BE ISSUED UPON APPROVAL. THE PERMIT MUST BE POSTED OUT IN FRONT OF THE PROPERTY</u>, VISIBLE FROM THE ROAD, BEFORE WORK COMMENCES. No tree shall be removed without prior written approval by the Holly Forest Environmental Control Committee.
- Tree removal application approvals may be granted by the ECC when a privately-owned and maintained tree located on private property has been qualified by the ECC as dead, dying, diseased, leaning, and/or poses a danger or threat to people and/or property.
- The plan submitted is complete and accurate.

Date: