

EBENSBURG BOROUGH

**300 W. High Street
Ebensburg, PA 15931
814-472-8780**

APPLICATION FOR SHADE TREE PERMIT

Date of Application: _____ (7 day advance notice required)

Property Address: _____ **Zip Code:** _____

Owner's Name: _____ **Phone:** _____

Owner's Address: _____ **Zip Code:** _____

Owner's E-Mail: _____

Contractor (if applicable): _____ **Phone:** _____

Contractor's Address: _____ **Zip Code:** _____

Scheduled Work: Date _____ Time _____

Tree(s) Description (include species) and exact location: _____

Action Desired (trimming, tree removal, planting, etc.): _____

Please return completed application to Ebensburg Borough. There is no permit fee.

Borough of Ebensburg
300 West High Street
Ebensburg, PA 15931
eburg@ebensburgpa.com

THE FOLLOWING CONDITIONS ARE TO BE OBSERVED

All debris from the work is to be hauled away including branches, foliage, trunk, fire wood, sawdust, etc.

The remaining stump and roots are to be removed and the area dressed and seeded. The stump and roots may be ground to a depth of eight (8") inches.

All associated work shall be completed in accordance with the terms of Ebensburg Borough Ordinance #591, dated September 26, 2011.

Owner and/or contractor is responsible for all safety measures, traffic control and any resulting damages.

APPROVED _____ **DISAPPROVED** _____

Any Special Conditions: _____

Title: _____

Signature: _____

Date: _____