



Application to Injure or Remove Trees on City Property

Please visit www.stcatharines.ca/trees for more information on City trees
including by-law no. 2017-326.

Address		
Street Number	Street Name	Unit Number
Property Owner Information Information as it appears on Deed/Transfer of Land		
First Name	Last Name	
Company Name (if applicable)	Company Officer (First, Last)	Position
Street Number	Street Name	Unit Number
City/Town	Province	Postal Code
Telephone Number	Email	

Personal information on this form is collected under the authority of the Municipal Act, 2001, as amended and will be used for processing this application. Questions about the collection of personal information can be directed to the City Clerk, 50 Church Street, St. Catharines, ON L2R 7C2, 905-688-5600.

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Applicant Information		
The City will communicate with the applicant regarding this application		
Applicant is: Same as above Arborist Contractor Other: _____		
First Name	Last Name	
Company Name (if applicable)	Company Officer (First, Last)	Position
Street Number	Street Name	Unit Number
City/Town	Province	Postal Code
Telephone Number	Email	
Owner's Authorization to Submit an Application		
To be completed only if the applicant is not the owner		
<p>I/We (owner) _____ authorize (applicant) _____</p> <p>to act as my agent and sign this application form on my/our behalf, in respect of the premises listed under Address section above.</p> <p>Owner Signature _____ Date (yyyy / mm / dd) _____</p> <p>Signature of Signing Officer(s), Position held, and Corporate Seal _____ (if owner is a company/partnership) _____ Date(yyyy / mm / dd) _____</p>		

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Details of Proposed Work

Check appropriate boxes and specify tree(s) to be injured or removed. If there are more trees than can fit in the chart below, then please list them on a separate sheet.

Note: a co-owned boundary tree is a tree having a trunk that straddles both City property and private property, per the Ontario Forestry Act.

Tree Number	Tree Diameter (cm)	Check One		Check One		Total Number of Trees in this Application
		Remove/ Injure	Destroy	City Tree	Co-owned Boundary Tree	

Reason for application:

Please specify the related planning and/or engineering application(s) and file number(s) (site plan approval, subdivision approval, condominium approval, consent to sever, development agreement, curb cut, etc.):

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Application Fee Calculator

Upon submission of the Application to Injure or Remove Trees, the City will source a quote from a contractor to complete the requested work and additional fees will apply. Additional fees may include, but are not limited to, the scope of work determined by the approved contractor, tree removal(s), stump removal(s), boulevard reinstatement(s) and/or tree replacement(s). Note: at no time will a private property owner be permitted to undertake the work contemplated under this application, unless otherwise authorized by the City.

Application fee to Injure or Destroy a City or Boundary Tree (first tree) \$108.25

Application fee to Injure or Destroy a City or Boundary Tree (each additional tree after the first) \$54.10

Number of trees 1 x \$108.25 = \$ 108.25

Number of trees x \$54.10 = \$

Total **application** fee: \$

Fees are subject to change. Accepted methods for payment of fees: cheque, money order, cash, credit or debit card. Please make all amounts payable to the City of St. Catharines. Application fees are non-refundable and payable at the time of initial application. Submission of an application does not guarantee that the proposed work will be approved.

Authorization

I have read and understand the attached information and am aware of the procedures required under the provisions of by-law no. 2017-326. I hereby certify that the information, reports and plans (see check lists below) provided are correct and truly indicate my intentions respecting the proposed work.

I acknowledge and understand that an officer and/or contractor may be required to enter on the applicant/owner's land at any reasonable time, and in accordance with the conditions set out in Sections 435 and 437 of the Municipal Act, 2001, for the purpose of completing the approved scope of work and/or carrying out an inspection to determine whether by-law no. 2017-326 is being complied with.

Signature (owner/applicant):

Print Name (first, last):

Date (yyyy / mm / dd):

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Application to Remove (Destroy) Check List

The following items must be submitted to complete your Application to Remove (Destroy) Trees. **Incomplete applications will not be processed.** Depending on the nature of the application you may be required to submit additional information.

	Completed Application Form
	Application Fee
	Arborist Report (if applicable)
	Landscape Plan (if applicable)
	Photos
	Site Plan (if applicable)
	Grading and/or Servicing Plan (if applicable)

Application to Injure Check List

The following items must be submitted to complete your Application to Injure Trees. **Incomplete applications will not be processed.** Depending on the nature of the application you may be required to submit additional information.

	Completed Application Form
	Application Fee
	Arborist Report (if applicable)
	Landscape Plan (if applicable)
	Tree Protection Plan
	Photos
	Site Plan (if applicable)
	Grading and/or Servicing Plan (if applicable)

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**Completed application forms, fees, and supplementary information
(if applicable) can be submitted in person:**

Monday – Friday
8:30 a.m. – 4:30 p.m.

City Hall
50 Church Street
St. Catharines, ON L2R 7C2

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