

THE CORPORATION OF THE DISTRICT OF OAK BAY

| PERMIT #: | |
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| | |

BYLAW NO. 4742, TREE PROTECTION BYLAW, 2020 TREE WORK APPLICATION AND PERMIT

| Section 1 | | | | |
|----------------------------|------------------|-------------------------------------|--|--------|
| | | | al. It is recommended that applicant refer to the Tree Cutting Byloblication. See www.oakbay.ca | aw |
| Date: | | | | |
| Name of Property Owner: | | | | |
| Address: | | | | |
| Phone (Residence): | | | Phone (Cell): | |
| Name of Applicant: | | | | |
| Address: | | | | |
| Phone (Residence): | | | | |
| Applicants Signature: | | | Email: | |
| | | | District of Oak Bay as authorized by the Local Government Act. It has been colle and Protection of Privacy Act. Please contact Corporate Services if you have any | ected, |
| To be completed by Applica | ant | | To be completed by Arborist | |
| Type of tree and location | Diameter of tree | Description of work to be performed | Municipal Arborist comments: | |
| Tree 1: | | | Work Approved YES NO | |
| | | | | |
| | | | | |
| Tree 2: | | | Work Approved YES NO | |
| 1100 2. | | | No. | |
| | | | | |
| | | | | |
| Tree 3: | | | Work Approved YES NO | |
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| Tree 4: | | | Work Approved YES NO | |
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| | n in a suitable | | application, detailing the proposed cutting of, damage to, or pruning of t | rees. |
| Approval Stamp | | Replacement trees | required NO YES - Number of trees required | |
| | | | | |
| | | | | |
| | | Bond Term: | | |
| | | Bond Amount: | Permit Fee: | |
| | | Municipal Arborist | Signature: | |

Rev. 010222

As a condition of granting a tree removal permit under section 9.2 (i) of the Tree Protection Bylaw, a replacement tree is required for each tree removed in locations approved by the Manager of Parks Services. An owner that is subject to this requirement must provide the District of Oak Bay a security deposit of \$500.00 per tree to be held for a period of one year from the date of issuance of the permit.