



Tree Removal Application

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Mailing Address:
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Spartanburg, SC 29304-1749

Permit # _____

Prior to the removal of a tree in the City of Spartanburg, a Tree Removal permit must be obtained. To ensure the proposed tree removal complies with the City's tree removal regulations as outlined in the Spartanburg Zoning Ordinance Section 505.54, please look over the ordinance found under the planning tab on the city website.

Please complete the following information:

Property/Business Owner Name: _____ Phone: _____

Property Address: _____ Zone: _____

Email: _____ Tax Map #: _____

Contractor name: _____

Address: _____ City Business License #: _____

Phone: _____ Fax: _____ Email: _____

Is the tree(s) part of any required landscape, buffer yard, parking lot requirement, street frontage or located on a historical property?

Yes No If yes, please specify: _____

Nature of Work (Check One) Pruning Removal

Reason for Work: _____

Yard Location (Check all that apply) **Front** **Rear** **Side**

Notes:

I have read the City of Spartanburg Ordinances in regards to tree removal requirements and I understand all restrictions and rules therein.

I certify to the best of my knowledge that all information provided is true and correct and all work performed under this permit shall conform to all plans and specifications herewith submitted and shall conform to the City Zoning and Building Codes and all the laws and ordinances pertaining thereto. I attest that there are no recorded deed restrictions or restrictive covenants that apply to this property which are contrary to, conflict with, or prohibit the permitted activity being requested. If any information is false or misleading, the permit may be considered void and revoked. I hereby make application for permit to perform the work described herein and if permit is granted, I agree first and foremost to conform to all Ordinances of the City of Spartanburg, SC, pertaining thereto, whether specified herein or not, and in accordance with plans submitted.

Applicant Signature: _____ Date: _____

Printed Name and Title

For Official Use Only	For Official Use Only	Date Filed: _____
Tree Assessment: _____	Action: [] Approved [] Denied	
Replacement Requirements: _____	Signature: _____	
	Comments: _____	