



City of Brookhaven
 4362 Peachtree Rd NE, Brookhaven GA 30319
 (404) 637-0500 Fax (404) 637-0501
 code@brookhavenga.gov

Tree Canopy Reduction Notice

Property Owner	Address of Proposed Tree Removal:		
	Owner's Name:		
	Owner's Address:		
	Phone:	Fax:	Email:
	Property Owner/Agent's permission to remove trees provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Applicant	Applicant's Name:		
	Applicant's Address:		
	Arborist Certification Number (If applicable):		
	Phone:	Fax:	Email:
Tree(s) to be Removed	Species:	Circumference* or diameter:	
	Tree #1:		
	Tree #2:		
	Tree #3:		
	Tree #4:		
	Tree #5:		
*Please note the circumference in inches for each tree should be given at 4.5' above ground.			
Is there a stream in proximity to your property? (yes / no)			
Trees may not be removed from the stream buffer without City Arborist Approval			
Lot Size:		Number of Trees Remaining:	
Authorized Signature	<i>I understand that the City of Brookhaven's Tree Protection Ordinance requires that I maintain 60" diameter at breast height per acre of trees consistent with Chapter 14, Section 14-48 of the Code of the City of Brookhaven. I further attest that the documentation and statements included in this application are true and correct. If any information is found to be false or misrepresented, the notice will be deemed invalid.</i>		
	Applicant's Printed Name:		Date:
	Applicant's Signature:		
Staff	Staff Only		
	Received by:	Parcel ID:	Date Received:
	Notice Number:	Decision:	Date Issued: