



# TOWN OF MELBOURNE BEACH

BREVARD COUNTY'S OLDEST BEACH COMMUNITY ESTABLISHED 1883

## Town of Melbourne Beach *Tree Removal Application*

Effective Code

### Town of Melbourne Beach Code of Ordinance

#### 9A-3

#### **9A-4. PERMIT REQUIRED FOR CUTTING DOWN TREE. –**

*No person, organization, society, association or corporation, or any agent or representative thereof, directly or indirectly, shall cut down, destroy, remove, move or effectively destroy through damaging any tree situated on property in any zoning district without first obtaining a permit as herein provided.*

Type of Work: Remove and Dispose of \_\_\_\_\_ ↑ Trees.

Describe the work to be done:

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Address: \_\_\_\_\_

Owners Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contracting Firm: \_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

Approved  Disapproved  
Public Works Director

\_\_\_\_\_ Date: \_\_\_\_\_

Approved  Disapproved  
Building Official

\_\_\_\_\_ Date: \_\_\_\_\_

## Contractors and Subcontractors Verification

The Contractor or Owner, who obtained the above permit, shall submit this form for all applicable trades prior to the issuance of the above Tree removal permit.

<b><i>OWNER/ CONTRACTOR</i></b>	<b><i>CONTRACTOR OBTAINING PERMIT</i></b>
Name:	Company Name:
Address:	Address:
Contractor License#.	Contractor License#
	Printed Name of Contractor:
Signature:	Signature:
	Describe type of Specialty:



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## APPLICANT'S AFFIDAVIT

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction and landscaping in this jurisdiction

## OWNER'S AFFIDAVIT

**I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws and codes regulating construction, landscaping and zoning.**

\_\_\_\_\_

**OWNER**

**DATE**

STATE OF FLORIDA  
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me by means of  
\_\_ physical presence or \_\_ online notarization, on this \_\_ day of \_\_\_\_\_, 20 \_\_  
By \_\_\_\_\_ of  
\_\_\_\_\_ who is personally known to me \_\_\_\_\_ or has  
Produced identification \_\_\_\_\_.

\_\_\_\_\_  
Notary Signature & Stamp