

## APPLICATION FOR NOMINATION OF LANDMARK TREE(S) \$280.00 Fee

APPLICANT INFORMATION			
Name:			
Address:			
Hm/Wk Phone:	Cell #		
E-mail Address:	E-mail Address: Fax #		
Organization represented (if	any):		
Applicant's Signature:		Date:	
TREE INFORMATION			
Tree(s)(common, botanical, & cultivar if known):			
Address of tree(s):			
Location on property:			
Assessors Parcel Number:			
Pending Project Application Number, if applicable:			
JUSTIFICATION OF NOMINATION*			
Check where applicable and details			
☐ Historical Value:			
☐ Largest Known Species of	This Tree in Folsom:		
☐ Excellent Health:			
☐ Outstanding Habitat:			
☐ Unusual Species:			
☐ Superior Beauty:			
DBH Heigh	t Canopy	Approximate age	
*Please attach all supporting information to this form including: historical documentation, arborist or environmental reports, photographs, articles, etc.			
OWNER INFORMATION			
Property owner's name:			
Property owner's address:			
Property owner's m/wk:#		Cell #	
Property owner's email:		Fax #	
		cified in this application or am authorized and empowered to this application. I consent to the application for this	
Owner's Signature:		Date:	
******* STAFF USE ONLY ********			
Application Number:	Receipt Number:	Date approved or denied:	
City Council Action:	Approved □	Denied □	
Resolution Number:			
City Arborist notes:			