HERITAGE TREE DESIGNATION APPLICATION

City of Atlantic Beach
Community Development Department
800 Seminole Road Atlantic Beach, FL 32233
(P) 904-247-5800

FOR INTERNAL OFFICE USE ONLY

PERMIT # _____

INSTRUCTIONS

1. Complete and sign this application.
2. Attach required exhibits as listed on application checklist.
3. Contact the Community Development Department if you have questions.
4. Submit the completed application and all required exhibits to the Permits Desk at Atlantic Beach City Hall.

SITE INFORMATION

ADDRESS _____ RE# _____

SUBDIVISION _____ BLOCK # _____ LOT # _____

APPLICANT INFORMATION

NAME _____ EMAIL _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE # _____ CELL # _____ ☐ OWNER ☐ LEGAL AUTHORIZED AGENT

HERITAGE TREE DESIGNATION APPLICATION CHECKLIST

PLEASE ATTACH THE FOLLOWING EXHIBITS:

*Additional information may be required, depending upon circumstances unique to individual applications

- ☐ **EXHIBIT A - SITE PLAN:** Showing tree, structures and property lines
- ☐ **EXHIBIT B - MAP:** Showing where the property is located including major roads and landmarks
- ☐ **EXHIBIT C - PHOTOGRAPHS**
- ☐ **EXHIBIT D - ARBORIST REPORT**

SUBMITTAL REQUIREMENTS

1. Trees must be at least 30" diameter at breast height (dbh) and be one of the following: Cypress, Magnolia, Live Oak, Florida State Champion Tree, United States Champion Tree or World Champion Tree.
2. The property owner voluntarily nominates a Heritage Tree of their choice by completing this application.
3. If application submittal is complete, a Planner will come and inspect the tree within 14 days of the application receipt date.
4. If the tree is acceptable for designation, the application will be passed on to the City Commission for review and approval.

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT. I AGREE TO COMPLY WITH ALL PROVISIONS OF CHAPTER 23 (*PROTECTION OF TREES AND NATURAL VEGETATION*) AND ALL OTHER APPLICABLE CODES AND ORDINANCES OF THE CITY OF ATLANTIC BEACH.

SIGNATURE OF APPLICANT PRINT OR TYPE NAME DATE