



WALLOWA COUNTY
Planning Department
101 S River Street #105
Enterprise, Oregon 97828
541-426-4543 ext. 1170

PERMIT#: _____
E-PERMIT#: _____
DATE FILED: _____
TOTAL FEE: **\$30.00** _____
CHECK NUMBER: _____

TREE REMOVAL APPLICATION

LEGAL OWNER: _____ REFERENCE#: _____
APPLICANT: _____ TWP: _____
PROJECT ADDRESS: _____ RANGE: _____
MAILING ADDRESS: _____ SECTION: _____
PHONE NUMBER: _____ TAX LOT#: _____
E-MAIL: _____ ACRES: _____
ZONE: _____

PLEASE PROVIDE A TREE REMOVAL PLOT PLAN, ACCURATELY SHOWING ALL EXISTING TREES AND EXISTING/FUTURE STRUCTURES. PLEASE DETAIL WHAT TREE(S) YOU INTEND TO REMOVE ON THIS PLOT PLAN. SEE EXAMPLE. THE PLANNING OFFICE ALSO REQUIRES A BRIEF NARRATIVE DESCRIBING WHY THE CHOSEN TREE(S) NEED TO BE REMOVED FROM THE SUBJECT PROPERTY, (I.E. THEY ARE DISEASED, DEAD, OR ARE HAZARDOUS TO EXISTING/FUTURE STRUCTURES). THE PLANNING DEPARTMENT WILL NOT ACCEPT A TREE REMOVAL APPLICATION WITHOUT THESE MATERIALS.

I hereby certify that all of the above information furnished by me is correct to the best of my knowledge and issuance of this permit is based on this information. Any error committed by the issuing authority shall not excuse me from complying with any other applicable state and local laws and ordinances. I understand that any deviation other than that allowed by law may nullify and validity of this permit.

APPLICANT DATE

ACTION TAKEN

Planning Department Action _____ Planning Commission Action _____
Approved ___ Denied ___ Conditionally Approved ___ Conditions of Approval: _____

DATE OF ACTION

Permit Authorization: _____
Wallowa County Planning Department

EXAMPLE TREE REMOVAL PLOT PLAN

