

Hernando County Zoning Division

789 Providence Boulevard
Brooksville, FL 34601
352-754-4048

Visit us on the Internet:
www.co.hernando.fl.us



PERMIT NO. _____

TREE INSPECTION/PERMIT APPLICATION

COMPLETED APPLICATION MAY BE SUBMITTED IN PERSON, BY MAIL, OR
E-MAILED TO ZoningDepartment@hernandocounty.us

DATE : _____ EMAIL ADDRESS: _____

TREE CONTRACTOR (or owner): _____

CONTRACTOR PHONE: _____ CONTRACTOR LICENSE NO. _____

PROPERTY OWNER NAME _____ PHONE: _____

ADDRESS OF PROPERTY: _____

TYPE OF TREE: _____ DBH: _____ Location of tree(s): (Please mark or tag tree)

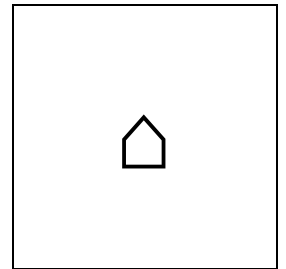
Front Yard _____ Back Yard _____ Left Side _____ Right Side _____

TYPE OF TREE: _____ DBH: _____

Front Yard _____ Back Yard _____ Left Side _____ Right Side _____

TYPE OF TREE: _____ DBH: _____

Front Yard _____ Back Yard _____ Left Side _____ Right Side _____



NUMBER OF NON-PROTECTED TREES BEING REMOVED _____

Tree is: (check all that apply)

- Safety hazard
- Insect Infestation or Disease
- Current or potential hazard to property
- Weakened by age, storm, fire or other injury posing danger to persons, property, site improvements or other trees
- Prevents direct access to property
- Prevents proposed reasonable use of site
- Tree located too close to home

Additional comments regarding tree and/or instructions regarding access to property (i.e. guard dog, locked gate, etc): _____

SIGNATURE OF TREE CONTRACTOR (or owner) _____

OFFICE USE ONLY

Square footage of property: _____ Number of trees required _____

INSPECTION RESULTS:

Comments: _____

INSPECTION DATE: _____

INSPECTOR: _____