



724 Lincoln Avenue
 Boone, Iowa 50036-4731
 515-432-6454
 Michael Cornelis, Director of Parks
 mcornelis@booneiowa.gov

Tree Planting Application/Permit

Applicant Name _____

Address : _____

Telephone : _____ Cell # : _____

Applicant E-mail address : _____

Property owner Name & Phone Number : _____

Proposed planting site must be staked, required prior to permit application

Tree type (species) : _____ Avg. Mature height _____ Spread _____

Overhead Utility Lines ? Are proposed tree locations staked ? Size of tree diameter @ 4' _____

Yes _____ No _____ Yes _____ No _____

COMMENTS : _____

Application Date : _____ Proposed Date of Planting : _____

Allow 5 business days to process permit

By signing this application, I hereby agree to abide by the terms of the permit conditions, if a permit is issued.

Signed : _____
 (OWNER OF ADJACENT PROPERTY)

Return application to Boone Parks ,724 Lincoln Ave. Boone, IA 50036

DO NOT WRITE IN SPACES BELOW-RESERVED FOR CITY STAFF

Approve : _____

Deny : _____

Reason for Denial : _____

Approved Tree Planting permit expires 30 days from application Date.

Urban Forester : _____

For Utility Locates Call 811, Allow 48 hours to complete