

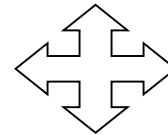
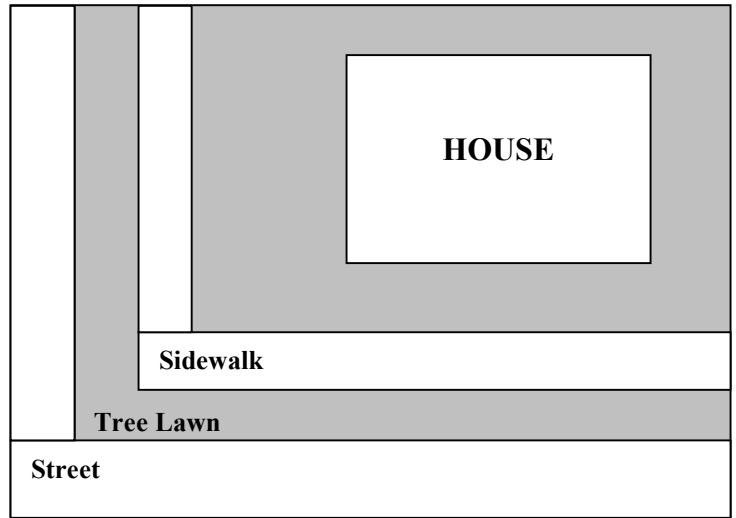
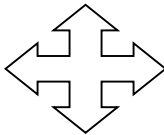
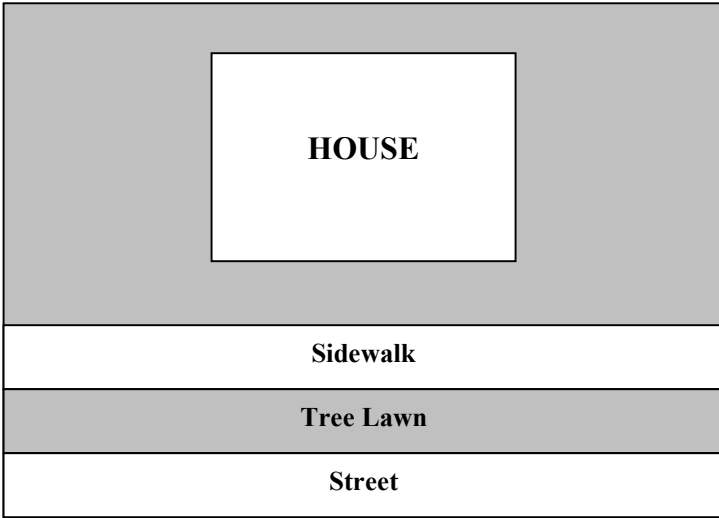
CITY OF NAPPANEE RESIDENTIAL REQUESTS FOR STREET TREE WORK

DATE: _____

NAME: _____ ADDRESS: _____

DAY PHONE: _____ HOME PHONE: _____

Please place an "X" on the appropriate diagram below to best indicate the location of the tree(s) in question. Also, add any additional structures, driveways or sidewalks on the lot as needed. Please indicate on the arrow below appropriate diagram the direction of north. Please return form to Clerk's Office at City Hall.



BRIEF DESCRIPTION OF WORK REQUESTED:

OFFICE USE ONLY

ADDRESS ID: _____ **TREE ID:** _____

FINDINGS: DENIED HOLDING WORK ORDER _____

TREE REMOVAL TREE MAINTENANCE STUMP REMOVAL TREE PLANTING

Description: _____

Date Inspected: _____ Type of Contact: _____