



# TOWN OF OCEAN RIDGE

6450 North Ocean Boulevard, Ocean Ridge, Florida 33435  
(561) 732-2635 Main ♦ (561) 737-8359 Fax  
oceanridgeflorida.com ♦ permit@oceanridgeflorida.com

## Tree Alteration Permit Application

To: Administrative Official

Date: \_\_\_\_\_

Fee: \$10.00 (cash or check only)

Permit No.: \_\_\_\_\_

Please review the Landscape Alteration Checklist and Town Code Section 66-151 prior to applying for the tree alteration permit. *Note: For environmentally sensitive areas, proof of approval from appropriate agencies will be required.*

Owner's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

PCN: 46-43-45 \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Species of Tree(s) and Work Description: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Therefore, in consideration of the granting of this permit, the undersigned, the owner and the contractor agree to perform the tree(s) alteration and/or removal, acknowledging that all ordinances and regulations of the Town of Ocean Ridge shall be complied with whether herein specified or not. The lot shall be left in a clean and manageable condition.

\_\_\_\_\_  
Signature of Owner or Duly Authorized Agent  
(If Authorized Agent, attach an Authorized Agent Letter)

\_\_\_\_\_  
Date

.....  
**For Official Use Only**

Paid: \$ \_\_\_\_\_ cash \_\_\_\_\_ check # \_\_\_\_\_ Date Paid: \_\_\_\_\_

Permission is hereby granted to remove the tree(s) as described above and per the survey submitted with this permit application. The person holding an approved tree alteration permit shall notify the administrative official prior to the scheduled removal and/or alteration of the tree(s), allowing sufficient notice for necessary site inspections. This permit shall expired one year from the date of issue, unless extended for no more than 60 days by the administrative official for good cause shown.

\_\_\_\_\_  
Administrative Official

\_\_\_\_\_  
Date