

NO FEE STREET TREE PERMIT APPLICATION

Please complete sections A and B, and return form to:	Public Works Department 1165 E. Taylor Street Vista, CA 92084-3303 (760) 639-6177
SECTION A	1
Property Owner:	Phone:
Address:	
Signature:	
SECTION E	3
I request permission to perform the following work: Location of tree(s):	
SECTION ((City Use On	
Date Received:	Date of Site Evaluation:
Tree in inventory: Yes No	Diseased: Yes No
Tree ID Number:	Hardscape damage: ☐ Yes ☐ No
Photo attached:	
Notes:	
CONDITIONAL ADDROVAL* (Power's in valid for 400	deve effer engreval)
☐ CONDITIONAL APPROVAL* (Permit is valid for 180	days after approval)
☐ DENIED	
* CONDITIONS : The existing tree will be removed; stump After tree removal, replace with tree from City of Vista Tree 15-gallon container size tree species; including root barrier	ee list (attached). New tree must be a minimum
Public Works Supervisor:	Date:
Public Works Operations Manager/Director:	Date:

Street Tree Choices

1. Common Name: Brisbane Box
Botanical Name: Lophostemon Confertus



2. Common Name: Crape Myrtle
Botanical Name: Lagerstroemia Indica



3. Common Name: Fruitless Olive Botanical Name: Olea Species



4. Common Name: Jacaranda
Botanical Name: Jacaranda Mimosifolia



5. Common Name: African Sumac Botanical Name: Rhus Lancea



6. Common Name: Australian Willow Botanical Name: Geijera Parviflora

