



CITY OF  
**CASTLE HILLS**

209 LEMONWOOD DRIVE • CASTLE HILLS, TEXAS 78213-2410 • (210) 342-2341 • FAX (210) 342-4525

**TREE TRIMMING PERMIT APPLICATION**

Permit Application # \_\_\_\_\_

**TREE TYPE:** OAK  NON-OAK

**RESIDENTIAL FEE:** OAK \$50.00 NON-OAK \$25.00

\*\*\*\*\*  
**COMMERCIAL USE OR MULTI-FAMILY FEE: \$75.00/ACRE (1 ACRE MINIMUM)**

**ACRES:** \_\_\_\_\_ **FEE:** \_\_\_\_\_

**Work Will Be Performed:**

PROPERTY ADDRESS \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_

OWNER TELEPHONE \_\_\_\_\_

**Description of work to be performed** \_\_\_\_\_

**COMPANY NAME & OWNER** \_\_\_\_\_

**NAME OF PERSON REQUESTING PERMIT** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
STREET CITY ZIP

**TELEPHONE/CELL #** \_\_\_\_\_ **FAX #** \_\_\_\_\_

**DRIVER'S LICENSE #** \_\_\_\_\_ **EXP** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**USE OF PROPERTY:** RESIDENTIAL  COMMERCIAL  TAX EXEMPT

I acknowledge that I must paint all wounds on oak trees within one hour of cutting, pruning or wounding of the tree, with opaque paint to prevent contact with contaminated nitidulid beetles.

I acknowledge that cuttings, debris, branches and logs resulting from the work will be removed within 48 hours from completion of the work.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**