

**Village of Airmont**  
Building Department  
251 Cherry Lane, Airmont, New York  
Mailing Address: P.O. Box 578, Tallman, N.Y. 10982  
Phone: (845) 369-8813      Website: www.airmont.org      Fax: (845) 357-8307

**TREE REMOVAL PERMIT APPLICATION**

According to Airmont Tree Code you are only permitted to take down 3 trees per year(live, dead or combo). Fee: \$50.00.

**The following information is required:**

- 1) Marking of Tree (s):** Trees requested for removal must be easily identifiable (i.e., ribbon, paint). The Village Building Inspector may do an on-site inspection.
- 2) Estimate** from the Licensed Tree Removal Contractor indicating species, location and condition of tree. The information must mirror your application.
- 3) Tree Contractor** must be licensed with the Village of Airmont
- 4) Certified Arborist letter** to accompany application for (i) dead, (ii) imminently dead or (iii) trees that are endangering public safety and proves an imminent peril. No fee charged for a dead tree.

*This Process may take up to 10 days from the time a completed application is submitted – **DO NOT** schedule an appointment for removal until “**APPROVED**” permit is received.*

Application is hereby made by the undersigned for a permit to remove a tree(s) on the premises owned by:

Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax Map: \_\_\_\_\_-\_\_\_\_-\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Contracting Firm Removing Tree(s): \_\_\_\_\_ Email address: \_\_\_\_\_

Contractor Address: \_\_\_\_\_ Business Number: \_\_\_\_\_ Cell : \_\_\_\_\_

**AFFIDAVIT OF PROPERTY OWNERSHIP**

State of New York  
County of Rockland

I, (owner name) \_\_\_\_\_, being duly sworn, deposes and says that she/he resides at \_\_\_\_\_ in \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_,

that he/she is the owner in fee of all that certain lot, piece or parcel of land situated, lying and being on the Village of Airmont Tax Map and he/she hereby authorizes on his/her behalf the filing of an application for a Tree Removal Permit, and that the statements of fact contained in said application are true.

\_\_\_\_\_  
Owner's Signature

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Notary Public)

Tax Map: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

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

## TREE REMOVAL PERMIT APPLICATION

This report shall specify (as best as possible) species, size in diameter and condition or damages that qualify the tree(s) to be removed under these circumstances. If the tree is damaged then the submittal should identify the location(s) of the damage, if the damage is compromising the tree, and, to what extent. This information should be separate from the proposal and be as detailed as possible to assist in the review for the tree(s) removal

	<b>Species of Tree (Attach page if more space is needed)</b>	<b>Approx. Height</b>	<b>Diameter</b>	<b>Location on Property</b>
<b>A</b>				
<b>B</b>				
<b>C</b>				
<b>D</b>				

Reason(s) for Tree Removal:

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Other Comments:

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I, \_\_\_\_\_ hereby accept full responsibility for  
(property owner )  
damage caused by the removal of any tree(s) covered by this permit. Date: \_\_\_\_\_

**APPLICATION IS HEREBY:**

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

DENIED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

REASON: \_\_\_\_\_

**The homeowner must visibly display the permit while the tree company is working on their property**