

(Regulation 5)  
FORM NO. 3 (A)

Application for a permit to harvest a protected tree

File Ref. No.: .....

Date: .....

1.

\_\_\_\_\_  
(Name of Application)

a. ADDRESS

P. O. Box: \_\_\_\_\_

Island: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

b. PROPERTY OWNER (if different to 1(a) above)

P. O. Box: \_\_\_\_\_

Island: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

2.

a. Location or site of the tree(s) in question

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

b. Is the site covered by a valid Permit for conduct of Excavation or Landfill? YES/NO

If yes, provide Permit No. \_\_\_\_\_

If no, what is the reason for the removal of the trees(s)

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(Example: Description of Operation: Land clearing, construction, removal/transplant/destruction of a tree for construction purposes or to prevent damage to existing structures)

- c. Applicant is to provide details of the following that apply to the proposed activity to the extent possible:

Land Clearing: \_\_\_\_\_

Size of area: \_\_\_\_\_

Common and scientific name of protected tree(s): \_\_\_\_\_

Number of Protected Trees Under the Act: \_\_\_\_\_

Age or size and/or height of tree(s): \_\_\_\_\_

Type of equipment used for harvesting protected tree(s): \_\_\_\_\_

Proposed method of harvesting protected tree(s): \_\_\_\_\_

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3. Restoration and After-use:

Applicant to indicate planned restorative and reinstatement plans and future land use plans for the site.

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\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Co-Applicant

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

Please allow 7 – 14 business days for processing of application

**OFFICIAL USE**

Date of Application: \_\_\_\_\_

Date of Public Notice if applicable: \_\_\_\_\_

Site Visit By: \_\_\_\_\_

Officer: \_\_\_\_\_

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

Evaluation of Application

By: \_\_\_\_\_

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

Comments:

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

Status: \_\_\_\_\_

Approved: \_\_\_\_\_

Refused: \_\_\_\_\_