

CITY OF ST. HELENA
NAPA COUNTY, CALIFORNIA
TREE PERMIT/CONTRACT
APPLICATION FOR CITY TREES

PERMIT # _____

TO: DEPARTMENT OF PUBLIC WORKS
1480 MAIN STREET
ST. HELENA, CA 94574

APPLICANT: Pacific Tree Care
(Property Owner or Contractor)

ADDRESS: PO Box 34 Calistoga, CA 94515
(Address, City, State & Zip)

PHONE: 707-942-0261

JOB LOCATION: 1550 Allyn Avenue

I (or we) hereby request permission to carry out the following Tree work as required in Section 17.8 & 17.10 of the City of St. Helena Municipal Code:

TREE TRIMMING TREE ROOT PRUNING TREE REMOVAL TREE REPLACEMENT

DESCRIPTION OF TRIMMING, ROOT PRUNING, REMOVAL AND/OR REPLACEMENT TREES:

Coast Live Oak @ corner of Madrona + Allyn
Remove deadwood 1" and larger, prune to reduce
end weight + gently thin the canopy

Estimated Start Date July 15, 2016 Estimated Completion Date Aug. 12, 2016

DIAGRAM OF LOCATION OF PROPOSED WORK

Attach diagram on separate sheet(s) if necessary

see encroachment permit

Applicant agrees to comply with all ordinances, regulations, specifications and conditions which may apply or be required as a condition of this Permit/Contract.

Applicant shall indemnify, defend and hold harmless The City of St. Helena and its agents, officers, officials employees and volunteers in interest from and against all claims, damages, losses and expenses including attorney fees arising out of or in connection with work performed under this Permit/Contract, except where caused by the sole negligence or willful misconduct of The City of St. Helena. This obligation of Applicant to indemnify, defend and hold harmless shall continue in effect after the completion of the project authorized under this Permit/Contract.

SIGNATURE OF APPLICANT Melissa Mery

SIGNATURE OF OWNER _____

CITY ARBORIST REPORT

Type of Tree(s) OAK Diameter(s) 35.5" DBH
(Site Sketch Required for Multiple Trees)

Sidewalk Damage: Yes _____ No Lift in Inches: _____

Other Damage: _____

Condition of Location: Good Fair _____ Poor _____

Hazards Present: Yes _____ No If Yes, Explain: _____

Distance of Utilities from Tree: Water N/A Sewer N/A Other _____

Overhead Obstructions: Yes No _____ If Yes, Explain type and height: COMMUNICATION 18'

Recommend Approval: Yes No _____

Comments: Minor Pruning

Signature [Signature] Date 6/7/16

City Arborist _____

* * * * *

SITE SKETCH FOR TREE OR TREES
Attach diagram on separate sheet(s) if necessary

PART 3 of 6

ACTION BY PUBLIC WORKS DIRECTOR

Date Received by Public Works Director _____

Approved _____ Denied _____ Modified as Follows _____ Referred to Tree Committee _____

Requirements/Conditions: _____

Signature _____ Date _____

Public Works Director Signature _____ Date _____

* * * * *

PART 4 of 6

ACTION TAKEN BY TREE COMMITTEE

Date of Meeting _____ Refer to Minutes Dated _____

Approved _____ Denied _____

Comments/Recommendation _____

Signature _____

Tree Committee Chair Person _____

* * * * *

PART 5 of 6

APPEAL INFORMATION
(For Tree Planting Only)

The Tree Committee has been appointed by the City Council, pursuant to Section 17.5 of the Municipal Code of the City of St. Helena. If you are dissatisfied with the above action by the Tree Committee, you may, within fourteen (14) days of the receipt of this notice, file an appeal with the City Council as provided in Section 17.12 of the Municipal Code. The Tree Committee may comment and make a recommendation to the City Council.

_____ I wish to appeal this action to the City Council.

I certify that I am the owner of the property described above or the owner's representative and I understand the approved requirements and conditions.

Signature of Applicant _____ Date _____

PART 6 of 6

ACTION TAKEN BY CITY COUNCIL
(If Appealed)

Date of Meeting _____ Refer to Minutes Dated _____

Approved _____ Denied _____

Modified as Noted _____

Signature _____

CITY OF ST. HELENA
ENCROACHMENT PERMIT
APPLICATION

PERMIT # _____

TO: DEPARTMENT OF PUBLIC WORKS
1480 MAIN STREET
ST. HELENA, CA 94574

Applicant: Pacific Tree Care
(Property Owner or Contractor)

Email: info@pacifictreecare.com

Phone: 707-942-0261

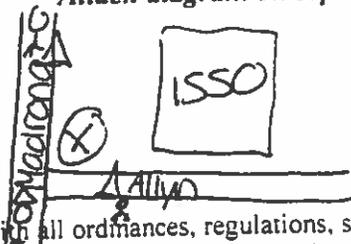
Job Location: 1550 Allyn Ave.

I (or we) hereby apply for an encroachment permit to carry out the following work:
Utilize public R-O-W to process debris. Provide vehicle and pedestrian control as needed.

Estimated Start Date July 15, 2016 Estimated Completion Date Aug. 12, 2016

DIAGRAM OF LOCATION OF PROPOSED WORK

Attach diagram on separate sheet(s) if necessary



Permittee agrees to comply with all ordinances, regulations, specifications and conditions which may apply or be required as a condition of this Permit/Contract. (See insurance requirements and general and special conditions pages).

Permittee shall indemnify, defend and hold harmless The City of St. Helena and its agents, officers, officials employees and volunteers in interest from and against all claims, damages, losses and expenses including attorney fees arising out of or in connection with work performed under this Permit/Contract, except where caused by the sole negligence or willful misconduct of The City of St. Helena. This obligation of Permittee to indemnify, defend and hold harmless shall continue in effect after the completion of the project authorized under this Permit/Contract.

State Law required U.S.A. to be alerted for all underground work two (2) working days prior to start date

Applicant: Theresa Verney Office Mgr. 5/26/16
Signature Title Date

Conditions: _____

Approved By: _____
Public Works Staff Date