



# District of Peachland

Bylaw Department  
5806 Beach Ave  
Peachland, BC V0H 1X7

250-767-3710  
bylaw@peachland.ca  
www.peachland.ca

## Tree Cutting Application Form

### APPLICANT

Name: \_\_\_\_\_ Agent ☐ Owner ☐  
Company (if applicable): \_\_\_\_\_  
Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

### REGISTERED OWNER *(If applicant is different from registered owner)*

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

### PROJECT INFORMATION

Have you had a FireSmart Assessment done on the property? ☐ Y ☐ N

Address: \_\_\_\_\_ Est. Completion Date: \_\_\_\_\_

Project statement: Indicate why the tree(s) need to be removed, number and species of trees to be removed, is the situation hazardous, are other structures, properties going to be impacted, etc. *(Use the back if more space is needed)*

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Site Plan: Attach a site plan, aerial photo or survey plan, circling or otherwise identifying the tree(s) to be removed.  
**Trees need to be replaced at a 2:1 ratio. Indicate location of replacement trees with an 'X'.**

Refer to Tree Protection Bylaw 2404 for more details on cutting regulations, replacement requirements, & FireSmart principles.

Registered Owner Signature: \_\_\_\_\_

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

*If using an agent, your signature allows us to work with the agent on your behalf*

### OFFICE USE ONLY

Date received: \_\_\_\_\_ ☐ Approved (date) \_\_\_\_\_ ☐ Denied (Reason) \_\_\_\_\_  
Permit # **TP** \_\_\_\_\_

☐ Y ☐ N Fee Paid (\$50.00) (GL 211-545-125) ☐ Y ☐ N Fees waived by PFR for FireSmart  
☐ Y ☐ N Replacement trees required ☐ Y ☐ N Further information required \_\_\_\_\_