TREE CUTTING PERMIT APPLICATION & CHECKLIST

Within this package, you will find the tools you will need in order to complete your Tree Cutting Permit Application. The following contents are included:

- Application form
- Form letters for canvassing Affected Property Owners*
- Tree Cutting Permit (must be signed by CAO or designate before any cutting is allowed)
- Tree Management on Private Land Policy
- Village of Lions Bay Trees, Views and Landscapes Bylaw No. 393, 2007, as amended
- * An Affected Property Owner is any adjacent owner and any property owner whose line of sight or proximate enjoyment (eg: shade, aesthetics) may be affected if this application is approved.

Application checklist:

| Completed Application Form |
|---|
| Colour Photographs / Photocopies of Trees Proposed to be Cut |
| Comments from Affected Property Owners (must include their contact information for verification purposes) |
| Replanting Plan details and proposed timeframe, if applicable |
| \$75 Application Fee (cash/cheque payable to Village of Lions Bay, due upon package submission) |
| |

About the process:

Upon receipt of your completed application package, Staff will confirm all required information is included before referring the file to Public Works and then to the Trees, Views and Landscapes Committee.

Supplementary documents may be required in support of this application. Should land surveys or arborist reports be required, you will be notified accordingly. The applicant is expected to bear all associated costs.

The Trees, Views and Landscapes Committee will set a date and time to meet at the location of the proposed cutting and this meeting will be advertised and open to you and to the public. You or any member of the public may speak at this Committee meeting.

Recommendations and public comments, verbal and written, will be presented for Council consideration as soon as may be possible. Staff will send an email to you and any opponents to advise of the Council meeting date when the recommendations made by the Trees, Views and Landscapes Committee will be presented along with your application.

Follow up will be performed to ensure the Replanting Plan has been achieved, if applicable.

| Note: If your application is approved by Council, you will need to provide the following: | | | |
|---|--|--|--|
| | \$500 Damage Deposit | | |
| | Name of Arborist or Contractor | | |
| | Proof of WorkSafe BC Certification | | |
| | Proof of Insurance (\$5 million liability with Village of Lions Bay named as additional insured) | | |



Schedule "A"

Tree Cutting Application Form

All fields must be completed

Applicant's Full Name:

| Address: | |
|--|---|
| Phone: | Email: |
| Arborist/Contractor Name: | |
| Phone: | Email: |
| | |
| Office Use Only | Tree Application Number: |
| Received by: | Date: |
| Amount Paid: | Cash or Cheque: |
| Application Complete? (Y/N) | If no, reason: |
| Date referred to Public Works: | Date returned by Public Works: (See attached comments) |
| Date Application to Tree Ctte: | Meeting Date: |
| Agenda forwarded to Tree Ctte: | Minutes received from Tree Ctte: |
| Council Agenda Date: | Council Decision: |
| Parties Notified: | |
| Date of Letter Notifying Applicant of Decision: | Received Damage Deposit: Name of Arborist/Contractor: |
| (Mar 26-Aug 16 Registered Professional Biologist): | Proof of WorkSafe Certificate: Proof of Insurance (\$5 mil/VoLB Add'l Insured): |
| Permit Issued: | Post-work check by Public Works: |
| Damage Deposit Returned: | If not, reason: |



| Species/Description of Tree(s): | |
|--|---|
| | |
| | |
| Location of Troo/s): | |
| Location of Tree(s): | |
| | |
| | |
| *Trees must be clearly marked with marking tape in a Committee's site visit. | time for the Trees, Views and Landscapes |
| | |
| Reason for Removal: | ☐ Interfering with infrastructure (roads, |
| garage, fence, etc.) | sidewalks, etc.) |
| Dead, dying or diseased | Leaves causing problems |
| ☐ Unattractive | □ Blocking site access |
| ☐ Blocking sunlight | ☐ Affecting house value |
| ☐ Attracting wildlife | HazardousInterfering with view |
| Please provide additional comments which may be | |
| Trease provide additional comments which may be | aseran. |
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| Replanting Plan, if any (please include anticipated ti | imaframa for completion): |
| Replanting Flan, if any (please include anticipated to | interraine for completion). |
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I have attached a colour photograph or colour photocopy of the subject tree(s) with descriptive notes ormarkings if applicable.

I have verified the information contained within this application is correct. No cutting of Significant Trees, as defined by Schedule "C" to Village of Lions Bay Tree Bylaw No. 393, 2007, as amended, is contemplated by this application or, if it is, this fact is clearly and explicitly set out in the application along with supporting rationale.

I acknowledge that responsibility for bylaw compliance rests with me as the applicant. I will indemnifyand save harmless the Village of Lions Bay, its officials, employees and agents against claims, liabilities and expenses of every kind, in respect of anything done or not done pursuant to this application or ensuing permit, if issued, including negligence and/or failure to observe all bylaws, conditions, acts or regulations.

I understand that, should this application be approved, all work performed must comply with any and all conditions of approval incorporated in the Council resolution, and that failure to comply with such conditions may result in fines, penalties and/or legal action.

I understand that per section 3.4.8 of Tree Bylaw No. 393, 2007, in order to protect nesting birds, no tree cutting may be carried out between March 26th and August 16th in any given year, unless:

- the cutting is required to deal with a Hazardous Tree; or
- subject to the requirement for a nesting survey by a Registered Professional Biologist, the cutting is approved by the Council as an exception where the application is connected to a building permit or other process which, if delayed, the Council considers would result in hardship to the applicant and the Council may consider:
 - i. the circumstances of the applicant;
 - ii. the scope and location of the application;
 - iii. the timing of the cutting in relation to the nesting calendar attached as Schedule "E" to the Tree bylaw.

| Name of Applicant (Please Print) | Signature | Date Signed |
|----------------------------------|-----------|-------------|



Form letter for canvassing Affected Property Owners (print as many copies as may be necessary)

| Date: | | |
|------------------------------|---|--|
| Affected Property Owner's Na | me: | |
| Address: | | |
| Email Address: | | |
| Phone Number(s): | | |
| _ | | |
| Dear | : | |
| Re: Tree Cutting Applicati | on | |
| | n for a permit to remove trees on municipal property and, as part of ired to notify Affected Property Owners. The specifics of the applicat | |
| Location: | | |
| | | |
| | | |
| Type(s) of Tree(s): | | |
| | | |
| | | |
| Description of Work: | | |
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| | | |
| Replanting Plan: | | |
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| Rationale for Application: | | | |
|---|---|--|------------------------|
| | | | |
| would appreciate if you would support or any concerns regain package. | operty Owner, please accept this lead provide me with your written resording this work, so that I may forwograph or colour photocopy of the | sponse as soon as possible, n ard your comments with my | oting your application |
| markings if applicable. | | | |
| Thank you, | | | |
| | | | |
| Applicant Name | Email | Phone | |
| Affected Property Owner: | | | |
| With respect to the above Tr | ee Cutting Application, I | | , am |
| Supportive Opposed | | (Name) | - |
| Comments (if any): | | | |
| ., | | | |
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| | | | |
| Name: | Dat | te: | |

Public Works Tree Cutting Referral Comments

| Tree Cutting Application Number: |
|---|
| Name of Applicant: |
| Address of Applicant: |
| Location of Tree(s): |
| Clearly on Municipal Land: (Y/N) |
| (If no, survey required at applicant's cost) |
| Location in Relation to Municipal Infrastructure (Present & Future): |
| |
| Location in Relation to Others' Infrastructure (Telus / Hydro Lines, etc.): |
| Slope Stability Considerations: |
| |
| Replanting Required (Y/N and recommendations, if any): |
| Other Considerations / Comments: |
| Attachments (Y/N and Description): |

Generally...

- Tree topping is never a justifiable pruning practice; it increases tree health problems and is aesthetically unappealing
- A topped tree will require constant maintenance and has an increased potential to become hazardous
- Hazardous trees are a liability and ultimately the property owner (ie: the municipality) may be liable for any damage that hazard trees cause
- Certified arborists and other legitimate landscape professionals do not practice tree topping
- If problems caused by a tree cannot be solved through acceptable management practices, the tree should be removed and replaced with plant material more appropriate for the site