



CITY OF COLUSA

TREE REMOVAL REQUEST

NAME:

ADDRESS:

PHONE NUMBER:

EMAIL ADDRESS:

SITE ADDRESS:

TREE PLACEMENT IS UNDER HIGH VOLTAGE POWER LINES:

Yes

No

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Species /Tree to be removed

Qty.

On
Master List

AGREEMENT

I AGREE TO HOLD HARMLESS THE CITY OF COLUSA, ITS AGENTS, OFFICERS, AND EMPLOYEES FROM ANY DAMAGE OR INJURY WHATSOEVER CAUSED BY OR IN ANY WAY RELATED TO THE PLANTING, PLACEMENT, MAINTENANCE, OR REMOVAL OF THE TREE. THE OWNER OR OWNERS OF THE RESPECTIVE PROPERTY SHALL BE SOLELY LIABLE FOR ANY DAMAGES.

Signature

Date

For City Use Only:

Received:

Approved:

Payment Rec'd:

Cash:

Check#

Initials

Comment/Notes: