

## **Tree Removal Permit Application**

**Telephone:** (864) 681-3178 Planning Department, 100 Hillcrest Sq., Laurens, SC 29360

Mailin	g Address:	РΟ	Box	815

Laurens, SC 29360

	Permit #		_	
permit must be obtained. To regulations as outlined in A	o ensure the proposed tree ren ppendices B and C of the Cour l Guide found under the Plans	noval complies with th nty's Subdivision Ordi	f Laurens County, a Tree Removal e County's tree protection and removal nance #926, please look over the page at https://laurenscounty.us/	
-			Phone:	
		Zone: Tax Map #:		
			D : 1: "	
			Business License #:	
Phone:	Fax:	Email:		
Is the tree(s) part of any requ or located on a historical pro If yes, please specify:		al buffer yard, parking	lot design requirement, street frontage,	
Reason for Work:				
Site Location & Additional Comments or Notes:				
Guide in regards to tree  I certify to the best of my know conform to all plans and specifi and appendices pertaining the property which are contrary t misleading, the permit may be herein and if permit is granted	ledge that all information provid fications herewith submitted and reto. I attest that there are no ro, conflict with, or prohibit the considered void and revoked.	nents and I understand ed is true and correct and shall conform to the Co ecorded deed restriction permitted activity being hereby make application	endices B and C, and the Tree Removal all restrictions and rules therein.  If all work performed under this permit shall bunty's Code of Ordinances and all the laws sor restrictive covenants that apply to this grequested. If any information is false or in for permit to perform the work described of Laurens County, SC, pertaining thereto,	
Applicant Signature:			Date:	
	Printed Name and Title	2	-	
For Official Use Only		For Official Use Only	Date Filed:	
Tree Assessment:		- Action: [ ] Approved	[ ] Denied	
Replacement Requirements:		Signature:		

Comments: .