

REQUEST FOR ASH TREE FELLING ASH TREE THAT IS 10 CM OR MORE IN DIAMETER MEASURED AT 1.4 M FROM THE GROUND

By-Law concerning the control of the spread of the emerald ash borer on the territory of the city of Montréal (15-040)

The present request form duly filled with supporting information and documentation incomplete rec									be p	roce on a	ssed	upor	n the reception of the	
that can be forwarded: missing information and / or documents. 1) by email at permis.pfdsrox@montreal.ca or online at http://montreal.ca														
2) in person at the Borough Hall located at 13665 Pierrefonds Boulevard, Pierrefonds 3) by mail addressed to Construction and Occupation Division, Borough of Pierrefonds-Roxboro, 13665 boul. from Pierrefonds, Pierrefonds, H9A 2Z4														
APPLICANT'S INFORMATION														
Name/Title	Address and Postal Code N°									N°				
Owner Agent (with power of attorney)										Phone :				
·										Other:				
	Email:													
Name														
TARGETED LOCATION														
Owner's Address :	AND/OR Lot Number:													
JUSTIFICATION & DOCUMENTATION														
 □ It is dead or dying, of which 30% or more of the branches are dead □ It is affected by a disease or a pest organ irreversibly □ demonstration of the presence of a sign, recognized diagnosis or report showing that the ash tree is irreversibly affected, by a person, skilled in the field and having relevant qualifications (arborist, forest engineer / technician, horticulturist, agronomist, landscape architect) □ It poses a significant risk to the safety of residents or is likely to cause serious harm to property 														
☐ It prevents the realization of a construction project authorized under the applicable urban planning by-law, with the exception of an advertising sign ☐ Comments														
Provide the following documents														
 Photo of the ash tree for which the felling permit is required A plan showing the location of the ash on the property A declaration from the other co-owners stating that they consent to the ash's felling, if applicable 														
DECLARATION FROM THE CO-OWNERS														
We, the undersigned co-owners, declare that we agree to the felling of the ash (s) covered by this request.														
Name	Signature													
Name	Signature													
Name	Signature													
Oignature														
DESCRIPTION AND SKETO	CH OF LOCA	TION	OF T	HE T	REE	OR	TRE	ES (NUN	/BEF	RED)			
P.S.: A photocopy of the certificate of location would b	e preferable, o	therw	ise, ta	ike ca	re to	indi	cate p	recis	sely	the lo	ocatio	n of	the ash to be felled.	
Identify the trees to be felled before the visit of the insp	ector													
Tree no 1 :														
Tree no 2 :														
Tree no 3 :														
Tree no 4 :				**********	Building									
Tree no 5 :														
Tree no 6:														
Additional Information :														
					l	Str	aet	1				I		
Street DECLARATION														
I, the undersigned, declare that the information provided is, to the best of my knowledge, correct and authorize the Borough to make all the necessary verifications concerning my request.														
signature						-		-		Da	ate			