CITY OF GEM LAKE 4200 Otter Lake Road TREE & VEGETATION REMOVAL & ALTERATION PERMIT APPLICATION Fax: 651.747.2795 ALTERATION PERMIT APPLICATION

Contractor/Applicant										
Contact / Title										
Address										
Telephone / Fax										
MN License #										
Property Owner										
Contact / Title If Company										
Address										
Telephone / Fax										
Construction Street Address										
egal Description or PIN #										
Current Zoning & Use Residential Zoning R1 R2 R3 R4 C0ommercial Zoning GB GBII RB LDB									(Circle 1)	
TYPE OF WORK, VALUATION & CALCULATIONS										
{ } Tree Removal Less Than Threshold		{ } Shor		Shoreland	reland Zone 1 2 3 (Circle		{ }	Preservation Zone		
{ } Tree Removal Mon	{ } Wetland			Zone		{ }	Steep Slope Zone			
{ } Vegetation Alterat	{ } Natural B			arrier Zone		{ }				
{ } Tree Inventory Required {			V	Woodland	d Zone	{ }				
TREE REMOVAL CALCULATIONS				CONIFEROUS	ONIFEROUS DECIDUOUS			SPECIES	TOTAL	
A. Gross Number Of Significan										
B. Number Of Significant Trees Dead, Diseased or Damaged										
C. Number Of Significant Trees Undesirable Species										
D. Net Number Of Significant Trees On Lot (Net Inventory)										
E. Number of Significant Trees										
F. Percent of Significant Trees To Be Removed From Lot (E + D)										
G. Number Of Significant Trees Retained On Lot (D - E)										
H. Percent Of Significant Trees Retained On Lot ($G \div D$)										
I. Number Of Significant Trees For Reforestation										
J. Percent Of Significant Trees										
VEGETATION ALTERATION/REMOVAL				ZONE	TOTAL AREA REMO		REMOV	AL AREA	RETAINED AREA	
TYPE:										
TYPE:										
TYPE:										
TYPE:										
TYPE:										
TYPE:										
	TOTAL ALTE	ERATION	REM	OVAL						
Applicant Signature									Date:	
Zoning Administrator Signature									Date:	
_ApprovedDenied									_ Total Fee S _ Check#	
S Bond Required Reforestation Plan Required										