



City of Minnetonka Beach

2945 Westwood Rd
 P.O. Box 146
 Minnetonka Beach, MN 55361
 952-471-8878 fax 952-471-7416
 info@ci.minnetonka-beach.mn.us

TREE REMOVAL PERMIT

See City of Minnetonka Beach Zoning Code, Chapter 4.2 at <https://www.ci.minnetonka-beach.mn.us>. No tree removal may occur until Permit issued.

PERMIT # _____ DATE ISSUED _____
 FEE PAID \$ _____

TREE REMOVAL PERMIT APPLICATION

Applies to Deciduous Trees 6" DBH (Diameter at Breast Height) and Coniferous Trees 12' or more, unless exempt by ordinance.

PROPERTY OWNER'S NAME	CELL NUMBER	EMAIL ADDRESS
ADDRESS WHERE TREES WILL BE REMOVED		
TREE CONTRACTOR NAME	MINNETONKA BEACH LICENSE #	
PRIMARY CONTACT – JOB SUPERVISOR	CELL NUMBER	EMAIL ADDRESS

** Tree Contractor must be licensed by City and Tree Removal Permit issued before work begins

GENERAL INFORMATION

Lot Sq. Footage _____ Required Minimum Tree Density _____ Number of Trees on Lot _____
 Minimum Tree Density will be met after removal Yes _____ No _____
 Replacement trees are required Yes _____ No _____ Number or inches required for replacement trees _____
 Hazard Tree, diseased or dying tree will be removed Yes _____ No _____
 Construction related project Yes _____ No _____ If yes, MB building/land use permit number _____

PROTECTED TREE(S) PROPOSED TO BE REMOVED

Indicate S= Significant; H=Heritage
 Attach additional pages if necessary

Label on Plan	Species	Width DBH Deciduous Tree	Height Coniferous Tree	Condition	Reason for Removal
1					
2					
3					

TREE(S) PROPOSED FOR REPLACEMENT, if required

Attach additional pages if necessary

Label on Plan	Species	Width DBH Deciduous Tree	Height Coniferous Tree	Expected Planting Date
A				
B				
C				

OTHER REQUIRED DOCUMENTATION

- A Site Plan or Tree Preservation Plan identifying Protected Trees on the property and labeled by number for those to be removed and labeled by letter for those to be replaced
 - Photographs of trees to be removed showing their condition and location with other trees on the property
 - Description of protection measures for remaining trees on the property.
- ** The city holds no responsibility in verification of ownership of a tree proposed to be removed. ****

CERTIFICATION

The undersigned certify that the following statements are true and correct and authorize the actions indicated below and as reasonably required by this application and any issued Permit:

- The information provided in this permit application and all attachments, including the submitted Site Plan or Tree Preservation Plan are true, complete and accurately reflect the status of the trees to be removed on the property and any replacement trees.
- If the application is approved, the work will be performed in conformance with the ordinances and codes of the City of Minnetonka Beach, with the Minnesota State Building Codes and all work will be in accordance with the approved plans. See <https://www.ci.minnetonka-beach.mn.us> for city ordinances and codes.
- The property owner authorizes photographs of the property and reasonable entry onto the property by City staff, consultants, agents, and City officials.
- The undersigned agree to hold the City of Minnetonka Beach harmless from all liabilities that may arise directly or indirectly from work performed.
- Tree removal will be performed by a contractor licensed by the City prior to commencement of work.
- The property owner agrees to pay any fees incurred by the City associated with the processing and enforcement of this Application and any resulting Permit.
- The undersigned agrees that tree removal will not occur until this application is finally approved and the Tree Removal Permit is issued.

SIGNATURES

PROPERTY OWNER'S SIGNATURE (REQUIRED)	DATE	PHONE (REQUIRED)
AUTHORIZED TREE CONTRACTOR (REQUIRED)	DATE	PHONE (REQUIRED)

OFFICE USE ONLY

Date application received:	Received by:
Other notices to property owner or tree contractor:	Date application confirmed complete:

Approvals Required: Staff check all approvals applicable.

Review Board includes City Administrator, City Forester, City Tree Inspector and discretionary, City Engineer

Comments and Recommendation of City Staff and or City Administrator

APPROVED: City Staff or City Administrator Signature and Date

Comments and Recommendation of City Tree Inspector

APPROVED: City Tree Inspector Signature and Date:

Comments and Recommendation of City Forester

APPROVED: City Forester Signature and Date:

Comments and Recommendation of Other Experts: () Certified Arborist, () CA with Tree Risk Assessment Qualifications, () City Engineer, () City Planner.

OTHER: Title, Signature and Date:

Date of Review Board	Recommendation of Review Board	Date of Council Review	Recommendation of Council
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Restrictions on approval and tree replacement requirements:

