



50 M.L. KING BLVD., FL 32343

Phone (850) 574-2355

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Web Site: www.mymidwayfl.com

TREE REMOVAL & CLEARING PERMIT APPLICATION

E-911 Address: _____

Parcel ID #: _____

Applicant: _____
If the applicant is not the property owner an 'Authorization to Represent' is required.

Address: _____

City: _____ State _____ Zip _____

Code _____

Telephone number: _____ Cell #: _____

E-mail address: _____

How many trees are being removed _____

What is the approximate size of trees to be removed _____

Submittal Requirements*:

- _____ 1. Application and \$100 fee (Checks are to be payable to the City of Midway).
- _____ 2. A site drawing showing the limits of clearing and trees to be removed. Include dimensions of area to be cleared and location of protected of trees (20" at dbh or greater).
- _____ 3. Demonstrate requirements of LDR for tree protection and clearing requirements are met. Show tree protection barricades for protected trees at 100% of dripline.
- _____ 4. Authorization to Represent, if applicant is other than the owner.

Once approved a copy of this permit is to be posted prominently on site.

Applicant's Signature: _____ Date: _____

To be completed by City of Midway Planning Division Staff:

Approved/Denied: _____ Date: _____

Signature & Title: _____

Conditions, if applicable _____

DISPLAY ON SITE

PERMIT #: _____