

TOWN OF EDGARTOWN
OFFICE OF THE
SELECTMEN
70 Main Street, P.O. Box 5158
Edgartown, MA 02539
508-627-6180

APPLICATION FOR PERMIT TO REMOVE OR TRIM TREES

(Chapter 87 – Massachusetts General Laws)

Date: _____

Fee: \$250.00
non- refundable

The undersigned hereby applies for a permit to remove/trim tree(s) according to the following:

Name of Owner: _____

Mailing Address of Owner: _____

Phone # _____ Email: _____

Street Address of Property: _____

Assessor's Map & Lot: _____

Agent name: _____

Agent Mailing Address: _____

Agent Phone#: _____ Agent Email: _____

A letter of authorization is required with application when utilizing an agent.

Purpose of Work: _____

Description of Tree(s): _____

Replacement Tree(s): _____

Signature: _____

Date: _____

I, the above-named applicant, hereby agree to indemnify and save harmless the Town of Edgartown against and from all damages by reason of the above application, criminal or civil or on account of or during the time that the above-mentioned work occupies any portion of any Town ways.

***Note: A plot plan, to scale, with trees to be removed and placement of new trees as well as a letter of tree health from a certified arborist must accompany this application. ***

This process will begin with an ad being placed in the Vineyard Gazette which the applicant will be billed for.