

TREE REMOVAL PERMIT APPLICATION

PERMIT FEE: \$40.00 MITIGATION FEE: TBD STAFF TIME: TBD CREDIT CARD FEE 3%

CONTACT

Public Works Department City of Calistoga 414 Washington Street Calistoga, CA 94515

M-F 8:00am – 12:00pm 1:00pm – 4:30pm

Melissa Velasquez PH: 707-942-2828 FX: 707-942-9472

Send completed application and required documents to:

mvelasquez@calistogaca.gov

Contractors/Businesses must provide the following:

City of Calistoga Business License

Apply for a business license at:

https://calistoga.bizlicenseonline.com/

Please print confirmation of payment as it will be your temporary business license.

Commercial General Liability Insurance no less broad than ISO form CG 00 01 with minimum limits of \$1,000,000 per Occurrence; \$2,000,000 General Aggregate.

Certificate of Insurance specifically naming the City of Calistoga as additional insured; an Additional Insured Endorsement at least as broad as ISO form CG 20 12 or 20 26 and CG 20 37 must also be provided.

Workers' Compensation with statutory limits as required by the State of California Labor Code. The Workers' Compensation policy shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Permittee, its employees, agents and subcontractors.

Homeowner as "Applicant" is the responsible party applying for a permit and must provide a copy of their homeowner's Liability Insurance.

Mitigation Measures may be required to offset any tree removal. Tree mitigation deposits shall be a minimum of \$275.00 for each tree removed. Mitigation deposits on the protected Valley Oak is \$825.00 for each tree removed. Replacement trees shall be a minimum of 15-gallon container and 8-12ft tall. Any tree replacement on Lincoln Avenue shall be determined by the City. A list of suggested trees available upon request.

Mitigation Deposits will be held until the new tree(s) have been planted or for a period of 60 days, whichever is less. If mitigation is not met within 60 days, the deposit will be forfeited unless more time has been approved by the Public Works Department.

Forfeited Mitigation Monies to be deposited into the city's tree fund. This fund is used to plant new trees, trim and replace existing trees within city parks.



TREE REMOVAL PERMIT

Fill in the form and print. Then either scan & email, or fax, to contact at left

Permit No. **TP** -

A City permit is required for removal of (a) any tree with a diameter at breast height (DBH) of 12" or greater; (b) any native oak with a DBH greater than 6"; (c) any Valley Oak, seedling, sapling, or older; (d) any tree bearing an active nest of a fully protected bird (see Fish and Game Code Section 3511). An Arborist report may also be required. See Calistoga Municipal Code Section 19.01.040 for details. (See instructions on Page 2)

Location	of Remo v al:		Applicant:			
Applicant A	Address:			Phone:		
				Cell:		
Property (Owner:			Fax:		
Applicant Is:	Property 0	Owner Tree Servic	e Utility Company Othe	er Email:		
Begin Date	:		End Date:			
Contractor L	icense #:	City Business Lice		ness License GO TO: calistoga.bizlicenseonline.com I receive email confirmation as receipt.		
	Box if you will be w Right-of-Way			ent Permit will be required. An application can be Click I Want to: from dropdown on main webpage.		
	Iden	tify and describe tree(s) to b	e removed and state reason(s). Attach a	dditional pages if necessary.		
Number	Diameter DBH	Tree Type	Re	ason for Removal		
			SKETCH SITE PLAI	N		
Sketch site (aerial view) location of tand their dri	of the ree(s) ip line(s)					
Location, size and species of protected tree(s) to be removed.			HOUSE or STRUCTURE			
 Existing and/or proposed footprint of the structure(s), paving, and landscape areas. 						
3. Adjacent	street name(s).					
Please circle or label tree(s) to be removed.		Street				

TP	#	Page 2

INSTRUCTIONS FOR TREE REMOVAL APPLICATION

This packet contains filing forms and instructions for completing a tree removal application. Calistoga Municipal Code Section 19 should be reviewed for standards associated with tree removal.

PROCESS: Once a complete tree application has been submitted, it will be reviewed by the City Director of Public Works or his representative. This review may take up to 10 working days after submission of a complete application but we strive to process all applications as quickly as possible. Mitigation measures may be required to offset any tree removal. The Director of Public Works or his representative will determine the number of trees that must be planted as mitigation for any tree removal. Determining factors include the remaining trees by their size, age and type.

AS OF AUGUST 20, 2023: Tree mitigation deposit shall be \$275.00 for each tree to be mitigated; tree size shall be minimum of 15-gallon container. SPECIAL NOTE: Any tree replacements on Lincoln Avenue shall be determined by the City.

If work will be performed on or over the public right-of way, an Encroachment Permit is required. A Encroachment Permit Application may be obtained by going to the City's website at www.ci.calistoga.ca.us and clicking on "I Want To..." or pick one up at the Public Works Department.

INSURANCE REQUIREMENTS:

Tree Companies:

- 1. General Liability with a separate endorsement naming the City of Calistoga, its officers, officials, employees and volunteers as additional insured. Note: Should an applicant submit a blanket additional insured separate endorsement, signature of this application secures this as an agreement releasing the City of Calistoga of any and all liability with any work performed under this permit.
- 2. Worker's Compensation.

Homeowners:

 $1. \ \, {\sf Copy} \ of \ homeowner's \ liability \ insurance \ certificate.$

Certificates/Endorsements on file: Yes No

The undersigned has read and agrees to comply which this permit is issued. (Please complete t		-		·	ditions upon
Applicant Signature:			Date:		
FOR CITY USE ONLY					
TREE REMOVAL PERMIT FEE (TR)	\$40	CASH			
STAFF TIME (65)		\$		CHECK #	
SUBTOTAL				CREDIT CARD	
CREDIT CARD FEE (87)		.03		DATE	
TOTAL DUE				INITIALS	
TREE MITIGATION FEE (TR-2261)	#	\$275		CASH	
SUBTOTAL				CHECK #	
CREDIT CARD FEE (87)		.03		CREDIT CARD	
TOTAL DUE				DATE	
PAID BY				INITIALS	

Field Inspected by: _____ Date of Issuance: _____

Reason Denied: _____ Staff Initials: _____