ORANGE COUNTY ZONING DIVISION
201 South Rosalind Avenue, 1st Floor, Orlando, Florida 32801
Phone: (407) 836-5807 Email: Arborist@ocfl.net
www.orangecountyfl.net

Application –Tree Removal

All applications must comply with the requirements outlined in Section 15-301and include a Tree Survey completed by a professional surveyor, as defined by Section 15-277, of all Regulated Trees 8" DBH (Diameter at Breast Height) and greater (per Section 24-12(a)), Specimen trees (per Section 15-283(a)), and Heritage trees (per Section 15-283(b)), with this application. Once the application is processed you will be sent an application number and will be able to pay online through Fast Track.

An Arborist within the Zoning Division will review the application for compliance with the code. Additional reviews will be required by the Orange County Environmental Protection and Development Engineering Divisions. Allow up to 14 days for a complete review of the application. Be aware that if other departmental reviews are necessary, additional review fees will apply and will be due upon permit issuance. If approved, the permit will be valid for 60 days from that date of issuance.

Please submit your application online through Fast Track where you can also track the status of the application.

DISCLAIMER PLEASE NOTE:

Zoning approval of this Application does not authorize removal of existing ground cover, nor does it authorize ground clearing or use of heavy earth-moving equipment. Contact Orange County Development Engineering at (407) 836-7974 if such activity is proposed.

Zoning approval of this Application does not authorize removals in wetlands, conservation areas or in wildlife areas. Contact Orange County Environmental Protection at (407) 836-1400 if such activity is proposed.

Submittal Requirements:

- ☐ Application and Inspection Fees
- ☐ Property Appraiser Information and Maps https://www.ocpafl.org/searches/ParcelSearch.aspx
- ☐ Site Plan
- ☐ Tree Survey
- ☐ Building Permit Number(s) _____

Inspection Information:

A base inspection fee is due at the time of application (Fee Directory). Please note that the fee may be higher based on property acreage.

General Information (to be completed by applicant/property owner:

Owners Name: _____ Owner's Address: _____

Owner's Number: _____ Owner's Email: _____

Applicant's Name:_____ Applicant's Address: _____

Applicant's Number: _____ Applicant's Email: _____

Type of Tree Removal:

- ☐ Developed (Commercial, Industrial or Multi-family)
- ☐ Undeveloped/Lot Clearing (Result of violation)
- ☐ Timber Harvesting – Tree survey not required.
- ☐ Single-family or Duplex Greater than 2 Acres
- ☐ Bonafide Agricultural (Record keeping purposes only)
- ☐ Voluntary Lot Cleaning (Record keeping purposes only)

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Project Information:

Parcel ID(s)# (Click here for Parcel Information)_____

Property Address: _____

Acreage_____

Briefly Describe the reason for the removal:

_____

_____

_____

Tree Removal Table

Fill out the table below with the trees proposed for removal. If additional rows are required, duplicate this page. For an Arborist to accurately locate the listed trees, the assigned tree index shall match the tree's index in the submitted Tree Survey. Failure to properly locate and index the listed trees within your submittal will result in resubmitting a corrected Tree Removal Permit application.

Tree Index	Common Name	DBH (in.)	Reason for removal

APPLICANT SIGNATURE

I, the undersigned, have read this application and hereby attest that the above-referenced information is true and correct to the best of my knowledge and, during the pendency of this application, I understand my continuing obligation to notify Zoning staff, in writing, of the inaccuracy of any statement or representation which was incorrect when made or which becomes incorrect by virtue of changed circumstances.

Signature of Property Owner or Applicant: _____

Print Name and Title of Signatory: _____

Date: _____

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me, a Notary Public, by means of ☐ physical presence or ☐ online notarization this ___ day of _____, 20___, by _____, as _____ of _____, a _____, on behalf of said _____, who ☐ is personally known to me or ☐ has produced (type of identification) _____ as identification.

_____

Notary Public

Printed Name _____

My Commission Expires: _____

AGENT AUTHORIZATION FORM

I, _____, as the property owner of the property described below, hereby give my permission for _____, to act as my agent for the purpose of applying for individual tree removals on undeveloped property in accordance with the requirements of the Orange County, Florida Code of Ordinances.

Parcel ID(s)# _____

Property Address: _____

Legal Description: _____

_____

_____

_____

_____

_____ _____

Signature of Property Owner Date

_____

Print Name and Title of Property Owner

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me, a Notary Public, by means of ☐ physical presence or ☐ online notarization this ___ day of _____, 20___, by _____, as _____ of _____, a _____, on behalf of said _____, who ☐ is personally known to me or ☐ has produced (type of identification) _____ as identification.

Notary Public

Printed Name _____

My Commission Expires: _____