TREE REMOVAL REQUEST FORM – THE ARDEN TRUST

You may fill out a pdf of this form, sign electronically, and email to trustees.of.arden@gmail.com OR print and complete the form and drop it in the Trustees’ mailbox located at 2119 The Highway, Arden, DE 19810. The request will be handled by one of the Trustees who will be contacting you.

If the tree(s) to be removed is (are) within two feet of your neighbor’s leasehold boundary, you must indicate that both leaseholders agree on the leasehold location of the tree(s) by your initials here: _______ and your neighbor’s initials here: _________

There is no need to fill out a Tree Removal Request Form if your tree’s diameter is 6” or less. A tree’s diameter should be measured at a height of 54 inches. Measure the circumference at 54” and divide by 3.1415.

You do not need permission to take down Norway maples (Acer platanoides), Bradford pear (Pyrus calleryana), Tree of Heaven (Ailanthus altissima) or Japanese maples (Acer japonica), which are invasive and damaging to the Arden Woods.

The Trustees ask that the leaseholder consider replacing the downed tree(s) with other appropriate vegetation whenever possible, preferably native plants. Please consult our list of suggested native trees online in the Trustees section of www.arden.delaware.gov website or contact Elizabeth Varley or Carol Larson. We can advise regarding selections and acquisition of native plant material. Thank you.

Name: (please print) ____________________________________________________________

Lot number: ___________ Address: _______________________________________________

Phone (day, evening): __________________________________________________________

Email: ______________________________________________________________________

Authorization is requested to cut down the following tree(s): Date of application: __________

Tree type: ____________________________________________________ Diameter: ____________

Location on lot: __________________________________________________________________

Reason: _________________________________________________________________________

Tree type: ____________________________________________________ Diameter: ____________

Location on lot: __________________________________________________________________

Reason: _________________________________________________________________________

Signature of leaseholder: __________________________________________________________________

Trustee denial: ____________________________________________________________________ Date: _______

Trustee approval: __________________________________________________________________ Date: _______

Arborist consultation requested: __________________________________________________________________ Date: _______