

VILLAGE OF GLEN ELLYN  
PARKWAY TREE PLANTING PERMIT



**Request for Approval to Plant Trees on Village of Glen Ellyn Right-of-Way**

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Species of tree to be planted: \_\_\_\_\_ D.B.H. \_\_\_\_\_

Nursery that tree will be purchased from: \_\_\_\_\_

Date tree will be planted: \_\_\_\_\_ (Require five days notice for approval.)

Name of Company/Nursery planting tree: \_\_\_\_\_

Company/Nursery Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

***The Village Forester will mark the planting location before planting takes place.***

Signature of Applicant: \_\_\_\_\_

NOTE: The signature of the applicant verifies that he/she has read and understands those provisions of the Ordinance, the Arboricultural Specifications Manual and /or any other agreed upon standards that apply to the work for which this permit is sought.

Approved \_\_\_\_\_  
*Village Forester* *Date*

Not Approved \_\_\_\_\_  
*Village Forester* *Date*

Comments: \_\_\_\_\_

\_\_\_\_\_

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