



Planning Division  
 51 Winburn Way, Ashland OR 97520  
 541-488-5305 Fax 541-488-6006

# STREET TREE REMOVAL PERMIT

A tree that is located in any public street right-of-way or other public property may not be removed until a Street Tree Removal Permit has been submitted according to the Application Submission Requirements, below, and reviewed and approved by the City of Ashland.

An application for street tree removal must demonstrate that the tree is an emergency, hazard, or dead tree as outlined below in the Application Submission Requirements.

**Application Submission Requirements.** An application for a street tree removal permit shall include all of the following information.

1. **Application Form and Fee.** The application must include the information requested on the Street Tree Removal Permit form provided by the City of Ashland and the permit application fee. Only those property owners of a lot adjoining the street tree location or homeowners' associations responsible for street trees in their development or subdivision may apply to remove an adjoining street tree. If a tree is located in front of more than one property, each property owner or homeowners' association official must sign the Street Tree Removal Permit form.
2. **Site Plan.** A site plan of the property drawn to scale containing the following information. The scale of the site plan must be at least one inch equals 50 feet or larger.
  - a. North arrow and scale.
  - b. Property boundaries including dimensions of all lot lines and driveway locations.
  - c. Location and width of all public streets, planting strips, and sidewalks adjoining the site.
  - d. Size, species, and location of the tree(s) proposed to be removed.
3. **Written Statement.** A written statement explaining how the proposed street tree removal satisfies one of the following approval criteria. The Community Development director may require additional information to demonstrate that the proposed removal satisfies one of the following approval criteria including: 1) a written statement to be prepared by an arborist licensed by the State of Oregon Landscape Contractors Board of Construction Contractors Board and certified by the International Society of Arboriculture or American Society of Consulting Arborists; and 2) an International Society of Arboriculture (ISA) Basic Tree Risk Assessment Form to be completed by an arborist.

**Street Tree Removal Approval Criteria**

- a) Emergency Tree Removal. The tree presents an immediate danger of collapse and represents a clear and present hazard to persons or property. Immediate danger of collapse is defined as a tree that may already be leaning, with the surrounding soil heaving, and/or there is a significant likelihood that the tree will topple or otherwise fail and cause damage before a tree removal permit could be obtained through the non-emergency process.
- b) Hazard Tree Removal. The tree presents a clear public safety hazard (i.e., likely to fall and injure persons or property) or a foreseeable danger of property damage to an existing structure or facility, and such hazard or danger cannot reasonably be alleviated by treatment, relocation, or pruning. A hazard tree is a tree that is physically damaged to the degree that it is clear the tree is likely to fall and injure persons or property. A hazard tree may also include a tree that is located within a public right-of-way and is causing damage to existing public or private facilities or services and such facilities or services cannot be relocated.
- c) Dead Tree. The tree is dead. A dead tree is lifeless. Such evidence of lifelessness may include unseasonable lack of foliage, brittle dry branches, or lack of any growth during the growing season.

**Replacement and Stump Removal.** Applicants for approved Street Tree Removal Permits are required to remove any stumps and replace the tree. Stump removal and replacements for approved street tree removals shall meet the following requirements.

1. Any street tree removed shall be removed at ground level or lower. If a tree is removed below ground level, the surface must be restored to finish grade and any regrowth which occurs shall be promptly removed.
2. All street trees shall be an appropriate species selected from and planted according to the City of Ashland Recommended Street Tree List.
3. The minimum size for a replacement tree is eight feet in height or one inch in caliper measured at 12 inches above the root crown.
4. Applicants for a Street Tree Removal Permit may be required to replace the tree or trees being removed with a tree or trees of comparable value.
5. If a street tree is determined to be dead or dying, then the replacement need be no larger than the minimize size described above.

Type of Tree(s) \_\_\_\_\_

Approximate Diameter at breast height \_\_\_\_\_ Height \_\_\_\_\_ Canopy \_\_\_\_\_

Location of Tree \_\_\_\_\_

Reason for Request \_\_\_\_\_

Are there underground utility lines and/or overhead power lines present? \_\_\_\_\_

If yes, please list which lines are present \_\_\_\_\_

Is there sidewalk damage? \_\_\_\_\_ If yes, has a Public Works permit been issued? \_\_\_\_\_

OVER ►►

**DESCRIPTION OF PROPERTY**

Street Address \_\_\_\_\_

Assessor's Map No. 39 1E \_\_\_\_\_ Tax Lot(s) \_\_\_\_\_

Zoning \_\_\_\_\_ Comp Plan Designation \_\_\_\_\_

**PROPERTY OWNER**

Name \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**PROFESSIONAL PERFORMING THE TREE REMOVAL (e.g., tree service)**

Name \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**ARBORIST, LANDSCAPE ARCHITECT, OTHER**

Title \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Title \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

*As owner of the property involved in this request, I have read and understood the complete application and its consequences to me as a property owner. I hereby certify that the statements and information contained in this application are in all respects, true and correct. I further understand that if this request is subsequently contested, the burden will be on me to establish:*

- 1) *that I produced sufficient factual evidence to support this request;*
- 2) *that the information contained in this application are adequate; and further*
- 3) *that all trees, structures, or improvements are properly located on the ground.*

\_\_\_\_\_  
Property Owner's Signature (required)

\_\_\_\_\_  
Date

**STAFF DECISION:**

Permit is hereby (circle one):    Approved                      Approved with Conditions                      Denied

Conditions of Approval \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the tree 18" d.b.h or greater?     NO     YES

Has the City Manager has been notified:     NO     YES

\_\_\_\_\_  
Community Development Director/Planning Manager Signature

\_\_\_\_\_  
Date



# Basic Tree Risk Assessment Form

Client \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
 Address/Tree location \_\_\_\_\_ Tree no. \_\_\_\_\_ Sheet \_\_\_\_\_ of \_\_\_\_\_  
 Tree species \_\_\_\_\_ dbh \_\_\_\_\_ Height \_\_\_\_\_ Crown spread dia. \_\_\_\_\_  
 Assessor(s) \_\_\_\_\_ Time frame \_\_\_\_\_ Tools used \_\_\_\_\_

## Target Assessment

Target number	Target description	Target zone			Occupancy rate 1 – rare 2 – occasional 3 – frequent 4 – constant	Practical to move target?	Restriction practical?
		Target within drip line	Target within 1 x Ht.	Target within 1.5 x Ht.			
1							
2							
3							
4							

## Site Factors

**History of failures** \_\_\_\_\_ **Topography** Flat  Slope  \_\_\_\_\_ % **Aspect** \_\_\_\_\_  
**Site changes** None  Grade change  Site clearing  Changed soil hydrology  Root cuts  Describe \_\_\_\_\_  
**Soil conditions** Limited volume  Saturated  Shallow  Compacted  Pavement over roots  \_\_\_\_\_ % Describe \_\_\_\_\_  
**Prevailing wind direction** \_\_\_\_\_ **Common weather** Strong winds  Ice  Snow  Heavy rain  Describe \_\_\_\_\_

## Tree Health and Species Profile

**Vigor** Low  Normal  High  **Foliage** None (seasonal)  None (dead)  Normal \_\_\_\_\_ % Chlorotic \_\_\_\_\_ % Necrotic \_\_\_\_\_ %  
**Pests** \_\_\_\_\_ **Abiotic** \_\_\_\_\_  
**Species failure profile** Branches  Trunk  Roots  Describe \_\_\_\_\_

## Load Factors

**Wind exposure** Protected  Partial  Full  Wind funneling  \_\_\_\_\_ **Relative crown size** Small  Medium  Large   
**Crown density** Sparse  Normal  Dense  **Interior branches** Few  Normal  Dense  **Vines/Mistletoe/Moss**  \_\_\_\_\_  
**Recent or planned change in load factors** \_\_\_\_\_

## Tree Defects and Conditions Affecting the Likelihood of Failure

### — Crown and Branches —

Unbalanced crown  LCR \_\_\_\_\_ % Cracks  \_\_\_\_\_ Lightning damage   
 Dead twigs/branches  \_\_\_\_\_ % overall Max. dia. \_\_\_\_\_ Codominant  \_\_\_\_\_ Included bark   
 Broken/Hangers Number \_\_\_\_\_ Max. dia. \_\_\_\_\_ Weak attachments  \_\_\_\_\_ Cavity/Nest hole \_\_\_\_\_ % circ.  
 Over-extended branches  Previous branch failures  \_\_\_\_\_ Similar branches present   
**Pruning history**  
 Crown cleaned  Thinned  Raised  Dead/Missing bark  Cankers/Galls/Burls  Sapwood damage/decay   
 Reduced  Topped  Lion-tailed  Conks  Heartwood decay  \_\_\_\_\_  
 Flush cuts  Other \_\_\_\_\_ Response growth \_\_\_\_\_  
 Main concern(s) \_\_\_\_\_

**Load on defect** N/A  Minor  Moderate  Significant  \_\_\_\_\_  
**Likelihood of failure** Improbable  Possible  Probable  Imminent  \_\_\_\_\_

### — Trunk —

Dead/Missing bark  Abnormal bark texture/color   
 Codominant stems  Included bark  Cracks   
 Sapwood damage/decay  Cankers/Galls/Burls  Sap ooze   
 Lightning damage  Heartwood decay  Conks/Mushrooms   
 Cavity/Nest hole \_\_\_\_\_ % circ. Depth \_\_\_\_\_ Poor taper   
 Lean \_\_\_\_\_ ° Corrected? \_\_\_\_\_  
 Response growth \_\_\_\_\_  
 Main concern(s) \_\_\_\_\_

**Load on defect** N/A  Minor  Moderate  Significant   
**Likelihood of failure** Improbable  Possible  Probable  Imminent

### — Roots and Root Collar —

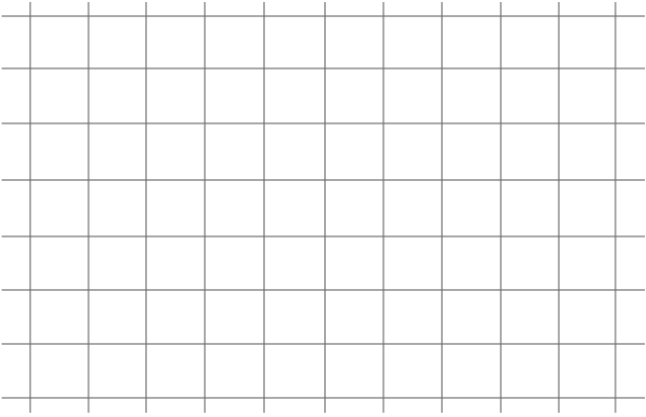
Collar buried/Not visible  Depth \_\_\_\_\_ Stem girdling   
 Dead  Decay  Conks/Mushrooms   
 Ooze  Cavity  \_\_\_\_\_ % circ.  
 Cracks  Cut/Damaged roots  Distance from trunk \_\_\_\_\_  
 Root plate lifting  Soil weakness   
 Response growth \_\_\_\_\_  
 Main concern(s) \_\_\_\_\_

**Load on defect** N/A  Minor  Moderate  Significant   
**Likelihood of failure** Improbable  Possible  Probable  Imminent

Risk Categorization																							
Condition number	Tree part	Conditions of concern	Part size	Fall distance	Target number	Target protection	Likelihood												Consequences				Risk rating of part (from Matrix 2)
							Failure				Impact				Failure & Impact (from Matrix 1)				Negligible	Minor	Significant	Severe	
							Improbable	Possible	Probable	Imminent	Very low	Low	Medium	High	Unlikely	Somewhat	Likely	Very likely					
1																							
2																							
3																							
4																							

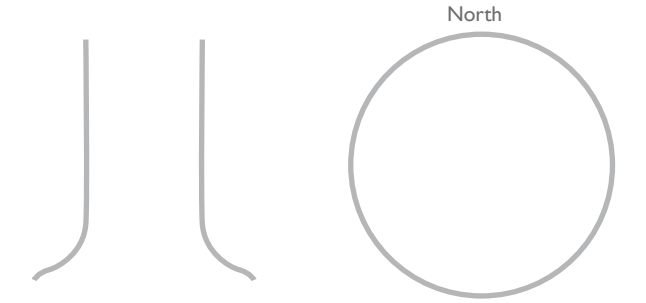
Matrix 1. Likelihood matrix.

Likelihood of Failure	Likelihood of Impacting Target			
	Very low	Low	Medium	High
Imminent	Unlikely	Somewhat likely	Likely	Very likely
Probable	Unlikely	Unlikely	Somewhat likely	Likely
Possible	Unlikely	Unlikely	Unlikely	Somewhat likely
Improbable	Unlikely	Unlikely	Unlikely	Unlikely



Matrix 2. Risk rating matrix.

Likelihood of Failure & Impact	Consequences of Failure			
	Negligible	Minor	Significant	Severe
Very likely	Low	Moderate	High	Extreme
Likely	Low	Moderate	High	High
Somewhat likely	Low	Low	Moderate	Moderate
Unlikely	Low	Low	Low	Low



Notes, explanations, descriptions \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Mitigation options \_\_\_\_\_ Residual risk \_\_\_\_\_  
 \_\_\_\_\_ Residual risk \_\_\_\_\_  
 \_\_\_\_\_ Residual risk \_\_\_\_\_  
 \_\_\_\_\_ Residual risk \_\_\_\_\_

Overall tree risk rating Low  Moderate  High  Extreme  Work priority 1  2  3  4   
 Overall residual risk Low  Moderate  High  Extreme  Recommended inspection interval \_\_\_\_\_  
 Data  Final  Preliminary Advanced assessment needed  No  Yes-Type/Reason \_\_\_\_\_  
 Inspection limitations  None  Visibility  Access  Vines  Root collar buried Describe \_\_\_\_\_