

CITY OF MASSILLON

(OFFICE	USE	ONLY)	

558 TREE REMOVAL PROGRAM APPLICATION

Each property is allowed assistance	only <u>one-time annually</u> under this program, regardless of the amount disbursed for that eligible proper	ty.		
	APPLICANT INFORMATION			
Street address of property:				
Owner (Co-owner) of property:				
Owner (Co-owner) address -if differ				
Phone:	Email Address:			
PROJECT DESCRIPTION:	PROJECT INFORMATION			
PROJECT DESCRIPTION.				
STATUS OF TREE (check one or mor	e): OVERGROWN (CIRCUMFERENCE IN INCHES)			
/	DEAD			
(ATTACH TWO PHOTOS OF TREE AND SKETCH OF AREA)				
·	DISEASED			
	OBSTRUCTIVE (TELL HOW):			
AFFIRMATION (APPLICATION WILL NOT BE	PROCESSED IF THIS BOX IS NOT CHECKED):			
I understand that the program is s	ubject to available funds and any tree removal quote must include stump removal.			
QUOTATIONS (TWO QUOTATIONS MUST B	E SUBMITTED WITH APPLICATION):			
QUOTE # 1 VENDOR NAME:	QUOTED PRICE: \$			
QUOTE # 2 VENDOR NAME:	QUOTED PRICE: \$			
во	TH QUOTES MUST BE ATTACHED IN ORDER TO PROCESS THIS APPLICATION	_		
	OWNER CERTIFICATIONS			
	nt of any tax bill, sewer bill, or other debt			
County A	uditor's Office? RIFYING DOCUMENTATION			
SIGNATURE OF OWNER	SIGNATURE OF CO-OWNER	DATE		
	orizes us to verify your tax status with the City of Massillon Income Tax Department	DATE		
	CITY USE ONLY			
APPLICATION APPROVED: YES NO IF DENIED, CITE THE REASON BELOW: Applicant is not the property owner Delinquent on payment of tax bill or other debt Property taxes not current AND not on payment plan				
QUOTE SELECTED: QUOTE # 1 Other (explain):				
[QUOTE # 2			
PRINTED NAME OF CITY REPRESENTA	ATIVE SIGNATURE	DATE		