TREE REMOVAL REQUEST FORM

From: ☐ Grounds Mgr. ☐ Parking & Transportation

☐ Construction ☐ Other_____

To: John Osborne

Location:

(Attach photo if possible)

Type and size of tree:

Reason for request:

Previous actions taken:

Preferred schedule for removal:

Will road/lot closing be required? ☐ YES ☐ NO Explain:

Recommendation:

☐ Approve

☐ Disapprove Initial ☐

Signature:_____

Gary A. Ransdell