



TREE REMOVAL PERMIT APPLICATION

BUILDING and NEIGHBORHOOD SERVICES
615-794-7012 Office 615-591-9066 Fax

GENERAL INFORMATION

Subdivision: _____ Lot #: _____ Building Permit #: _____
Project Address: _____ Suite/Unit #: _____
Project Name: _____ Residential: _____ Commercial: _____
Property Owner: _____
Property Owner's Phone Number: _____

CONTRACTOR INFORMATION

Contractor: _____
Street Address: _____
City: _____ State: _____ Zip: _____ E-mail: _____
Office phone: _____ Cell Phone: _____ Fax: _____

TREE REMOVAL DETAILS

Removal Date: _____
Approximate Number of Trees to be Cut: _____
Approximate Number of Caliper Inches to be Cut: _____
Largest Tree Caliper: _____

Signature: _____ **Date:** _____

Note: Contact Lori Jarosz (lori.jarosz@franklintn.gov) or 615.550.6728 at for confirmation of address assignment. Incorrect or incomplete information may result in permit revocation. Tree removal permit not required for parcels less than one acre.