



City of Carmel

DEPARTMENT OF COMMUNITY SERVICES

Application to Plant a Carmel Street Tree

Application is to grant permission to an applicant/property owner to independently plant a street tree(s).

1. Applicant/Property Owner:

Name: _____

Address: _____

Phone Number: _____ E-mail: _____

2. Project Information:

Proposed Location of Tree(s) on City Right of Way: _____

Name of Subdivision: _____

Dates Underground Locates will be Marked: _____

3. Type of Tree/Landscaping:

Please Refer to the Recommended Street Tree List
Tree Species and Quantity: _____

Please Refer to the Tree Planting Detail for Installation

4. Attachments:

Site Plan showing Preferred Location for the Street Tree(s)

Authorization from Owner (if Applicant is not the Owner)

The undersigned states the above information is true and correct as (s)he is informed and believes. Application must be turned in to the Department of Community Services prior to commencement of work. The authorization is not valid until signed by the Urban Forester. Please keep a copy of the signed application for your records. Contact with Call before You Dig (Holey Moley 1-800-382-5544 in Indiana) shall be the full responsibility of the applicant prior to the work date.

Signature of Applicant: _____ Date: _____

**Please email (dmindham@carmel.in.gov) or mail the City Forester at:* City of Carmel
Department of Community Service
1 Civic Square
Carmel, IN 46032

Do not write below

Approved by: _____