

**Notification of Intent to Cut
In the Shoreland Buffer Resource Zone
TOWN OF GREENSBORO
PO Box 119, Greensboro, VT 05841
Office: (802) 533-2640 Fax: (802) 533-2191
zoning@greensborovt.org**

“In any enforcement action for removal of trees or limbs in violation of Section 8.5, the burden of proving that the trees and limbs removed were unsafe shall be on the property owner”. – Greensboro Zoning By-law, page 63.

“In any enforcement action for removal of trees or saplings in violation of Section 8.6, the burden of proving that the removal of trees or saplings met the requirements of this section shall be on the property owner”. – Greensboro Zoning By-law, page 64.

FOR ADMINISTRATIVE USE ONLY

Application Number: _____ Tax Map Number _____
Zoning District _____
Date Application Received _____/_____/_____

Please provide all of the information requested in this application.

Applicant(s):

Name(s): _____
Mailing Address: _____
Telephone(s) Home: _____ Work: _____ Cell: _____
E-Mail: _____

Landowner(s) (if different from applicant(s)):

Name(s): _____
Mailing Address: _____
Telephone(s) Home: _____ Work: _____ Cell: _____
E-Mail: _____

Physical Location of Property (911 address):

Reason(s) for cutting vegetative matter (Unsafe, Dead or Dying, Maintenance of Existing Healthy Trees, Etc):

Please sketch the area of the property where the proposed cutting will occur. Please label the trees which will be removed and other aspects which will assist in locating the area in question.

Photographs of the property which clearly show the trees or saplings are required to establish proof that the removal complied with clearing limitations.

Written certification signed by an individual with knowledge and experience in assessing tree health – such as a professional forester, certified arborist, or professional landscape architect is also encouraged and may be required if proof of necessity of removal is requested.

Signature of Applicant(s) _____ **Date** _____

Signature of Landowner(s) _____ **Date** _____

Notes from the Zoning Administrator: _____

Please note that this form is not required prior to removal or clearing of unsafe trees or removal of trees or saplings so long as the clearing limitations are met. This optional form may assist you in establishing proof that the removal and clearing was done correctly and in keeping with the Greensboro Zoning By-law. This form is only applicable in the Shoreland Protection District.