



**TREE REMOVAL PERMIT APPLICATION**  
**TOWN OF BEDFORD BUILDING DEPARTMENT**  
**425 Cherry Street, Bedford Hills, NY 10507**  
**Phone # (914) 666-8040**  
[www.bedfordny.gov](http://www.bedfordny.gov)

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SBL: \_\_\_\_\_ ZONE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NUMBER OF TREES TO BE CUT, DIAMETER SIZE & LOCATION: \_\_\_\_\_  
 (Please submit copy of survey showing location of trees)

SPECIES: \_\_\_\_\_

PURPOSE OF CUTTING: \_\_\_\_\_

SIGNATURE OF OWNER: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

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BUILDING DEPARTMENT USE ONLY

FEE: \_\_\_\_\_

BOND AMOUNT: \_\_\_\_\_

PLANNING SIGN-OFF: \_\_\_\_\_  
 (Wetlands & Steep slopes)

DATE: \_\_\_\_\_

BUILDING DEPT. SIGN-OFF: \_\_\_\_\_

DATE: \_\_\_\_\_

TREE ADVISORY BOARD: \_\_\_\_\_  
 (If Applicable)

DATE: \_\_\_\_\_