



Fall

Form Due Aug. 30

Fall Tree Planting Request

Date: _____

Name: _____

Address: _____

Telephone: _____

Trees requested

Map of requested tree locations

_____ Emerald Queen Maple

_____ Crimson King Maple

_____ Schwelder Maple

_____ Sugar Maple

_____ Red Sunset Maple

_____ Little Leaf Linden

A large, empty rectangular box with a black border, intended for a map of the requested tree locations.

Note: Residents are responsible for watering requested trees

FOR OFFICE USE ONLY

_____ **Request Approved**

_____ **Request Denied**



Spring

Form Due Feb. 28

Spring Tree Planting Request

Date: _____

Name: _____

Address: _____

Telephone: _____

Trees requested

Map of requested tree locations

- _____ Emerald Queen Maple
- _____ Crimson King Maple
- _____ Schwelder Maple
- _____ Sugar Maple
- _____ Red Sunset Maple
- _____ Little Leaf Linden
- _____ Radiant Red Crabapple
- _____ Snowdrift White Crabapple
- _____ Newport Flowering Plum
- _____ Cleveland Select Pear (Non-bearing)

Note: Residents are responsible for watering requested trees

FOR OFFICE USE ONLY

_____ Request Approved

_____ Request Denied