



*Matthew Vitner, P.E.  
Interim Director/City Engineer  
Department of Public Works*

Dear Property Owner;

Thank you for contacting our office with your request for a Tree Maintenance Permit. This permit approval is a requirement prior to any maintenance activities being performed on a tree growing in the City's Right-of-Way. The following are considered maintenance activities, and they must be performed by a certified arborist:

- Tree removal
- Pruning
- Treatment
- Stabilization

Enclosed you will find a Tree Maintenance Permit Application. Please fill in completely and return two copies by mail or in person to:

City of Rockford  
Street Maintenance Division  
ATTN: Forestry Supervisor  
523 S. Central Avenue  
Rockford, IL 61102

Your application will be processed promptly and a permit issued to your contractor. Although there is no cost to you for this permit, you are responsible for all the cost incurred with this maintenance.

Should you have any further questions, please contact the Street Maintenance Division at (779) 349-7260. Our office hours are Monday through Friday from 7:00 a.m. - 3:30 p.m.

Forestry Supervisor

# **MAINTENANCE PERMIT APPLICATION**

Pruning, removal, treatment or bracing of street terrace trees  
*(THIS IS AN APPLICATION FORM AND IS NOT TO BE USED AS A PERMIT)*

**RETURN THE ENCLOSED APPLICATION TO:**

CITY OF ROCKFORD  
DEPARTMENT OF PUBLIC WORKS  
STREET MAINTENANCE DIVISION  
523 S. CENTRAL AVENUE  
ROCKFORD, IL 61102  
(779) 348-7260

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## **ARTICLE II. PERMITS**

### **I. Section 29-25. Required.**

No person, shall plant, transplant, move, spray, brace, trim, prune, cut above or below ground, disturb, alter or do surgery on any public tree or shrub within the city or cause such act to be done by others, without first obtaining a written permit for such work from the city forester.

### **II. Section 29-27. Issuance; contents; expiration.**

Every permit required by this article shall be issued by the city forester on forms prepared by him and shall include a description of the work to be done and shall specify the species or variety, size, nursery grade and location of the tree(s). Any work done under such permit shall be performed in strict accordance with the terms thereof and the provisions of this chapter. Permits issued under this section shall expire six (6) months after date of issue.

**The City of Rockford Forestry Department considers maintenance activities to include but not be limited to: any pruning of a city tree, removal of a city tree, applying pesticides (ie: EAB treatment) and stabilization (cabling, etc.).**

**I HEREBY AGREE TO ABIDE TO ALL PROVISIONS AND TREE MAINTENANCE REQUIREMENTS  
WITHIN THIS APPLICATION, AND TO THE PERMIT, WHEN ISSUED.**

\_\_\_\_\_  
PERMITTEE SIGNATURE

\_\_\_\_\_  
DATE

**PERMIT APPLICATION**  
**Maintain Street Terrace Trees**

**Site Address:** \_\_\_\_\_ **Property ID#:** \_\_\_\_\_

Property Owners Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Approximate Maintenance Date: \_\_\_\_\_

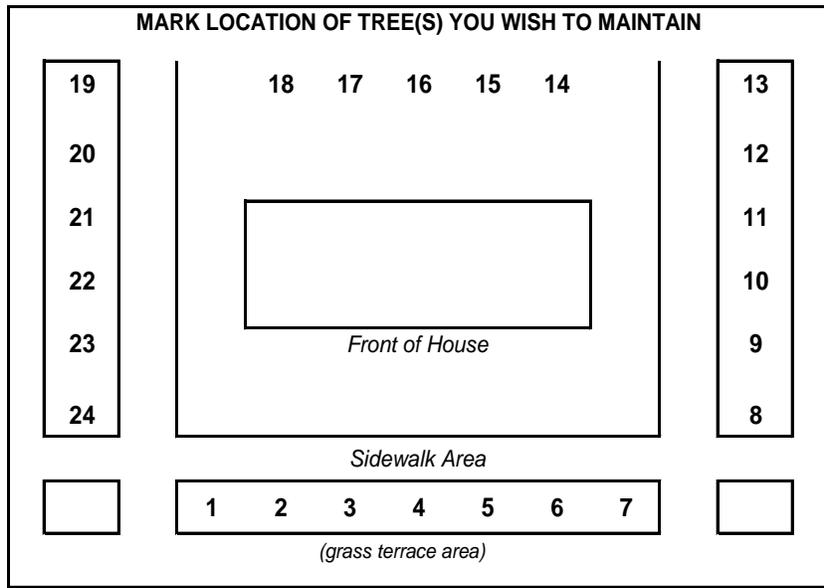
**Contractor Information:** (Maintenance activity must be supervised by an on-site Certified Arborist)

Business Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

On-Site Arborist: \_\_\_\_\_

Name I.S.A. #



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Cell #	Species & DBH	Proposed Maintenance (Be Specific)

I hereby agree to abide to all provisions and tree maintenance requirements within this application, and to the tree maintenance permit once issued.

\_\_\_\_\_ \_\_\_\_\_

Permittee Signature Application Date

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## City of Rockford Forestry Maintenance Permit

Cell #	Species & DBH	Permitted Maintenance (Be Specific)

I hereby agree to abide to all provisions and maintenance planting requirements within this application, and to this permit once issued.

\_\_\_\_\_  
Permittee Signature

\_\_\_\_\_  
Application Date

Site Inspection Date \_\_\_\_\_

RFS # \_\_\_\_\_

\_\_\_\_\_ Approved as submitted

\_\_\_\_\_ Approved with changes (Note below)

\_\_\_\_\_ Declined (Note Below)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
City of Rockford Signature

\_\_\_\_\_  
Determination Date