

# City of Sky Valley, Georgia

## Tree Cutting Permit Application

Please mail completed form and permit fee to:  
City of Sky Valley  
3444 Hwy 246  
Sky Valley, GA 30537

Property Location

### Property Owner Information

Name   
Address   
City  State  Zip Code   
Phone Number

### Applicant Information (if other than homeowner)

Name   
Address   
City  State  Zip Code   
Phone Number

**Lifetime Maximum of 25% of trees outside of house footprint can be cut. Topping is highly discouraged - Ask us why**

**Please select the appropriate box for number of trees to be Cut or Topped.**

Number of trees to be CUT   
Number of trees to be TOPPED   
Number of trees to be TRIMMED   
Purpose for Request:

- 1-5 trees \$75.00
- \$75 + \$15.00 for each additional tree over 5
- Trimming/Pruning - No fee
- Dead, Diseased, or Trees Creating A Hazard (to be verified by the City Marshal) - No fee

### INSURED CONTRACTOR who will be responsible for cutting/topping/trimming and removing tree cuttings

Name  Phone Number   
Liability Ins Carrier  WC Ins Carrier

**IMPORTANT INFORMATION - PROPERTY OWNER, APPLICANT & CONTRACTOR MUST ALL READ AND SIGN APPLICATION BELOW.**

This application MUST be accompanied by a plat or sketch indicating which trees are to be cut, topped, or trimmed. Contractor must provide proof of insurance prior to issuance of a tree cutting permit unless property owner signs Affidavit accepting full responsibility. Trees to be cut, topped, or trimmed MUST BE clearly marked. **Failure to obtain a tree cutting permit or cutting additional trees not approved by the City will be considered a violation of the City's Tree Cutting Ordinances and will subject OWNER/CONTRACTOR to a fine not to exceed \$1000 per tree as well as replanting requirements as set forth therein. Failure to remove any tree cuttings within 14 days of completion will be considered a violation of the Ordinance and will subject Applicant/Contractor to a fine of \$100 per day. APPLICANT is responsible for calling City Hall for a final inspection within said 14 day period to avoid these penalties.** Tree cuttings authorized under this permit are NOT eligible to be left out for the City's chipping service. By signing this application you are agreeing that you have reviewed the City's Tree Cutting Ordinances and you acknowledge reading and understanding the contents of this permit and said Ordinances and will comply with the provisions therein.

Property Owner Signature  Applicant Signature   
Contractor

### PERMITTED CUTTING AS APPROVED BY CITY

Number of trees to be CUT   
Number of trees to be TOPPED   
Number of trees to be TRIMMED

**FOR OFFICIAL USE ONLY**  
**PERMIT AS APPROVED BY**  
**THE CITY OF SKY VALLEY**

Ins/Affid & Sketch Received   
Date Received   
Date of Approval   
Permit Expiration **90 DAYS AFTER APPROVAL**

City Marshal Signature  Approval by City Manager