TREE REPLACEMENT PROGRAM APPLICATION FORM

1.	Applicant Information											
	Applicant Name: First		Last									
	Telephone (home) (Work)	Fax	Fax									
	Mailing/Civic Address	Tow	n		Postal Code							
	Preferred language of correspondence	e: English	☐ French									
	Project Location ☐ Owner ☐ Rented/leased (Name of property owner (if rented or Lot: Concession:	,										
	Current Ward:	Forr	ner Township									
	☐ Farm ☐ Rural Non-farm	Property (e.g. over 1	acre) 🗆 Resid	dential	☐ Business/Commercial							
3.	A complete application form co	nsists of:										
	a) Application Formb) Itemized quotes for project											
	Submit your comple	ted application form	to South Nation C	onservatio	n Authority:							
			Conservation Box 29									

P.O. Box 29 38 Victoria Street Finch, ON, K0C 1K0 Fax: 613-984-2872

Email: ashtree@nation.on.ca

For additional assistance please call: 877-984-2948

5. Additional Information Please refer to the Project Guidelines for additional information on project eligibility, Program requirements, and the application review process. Copies are available at www.nation.on.ca/eab							
6. International Society of Arborists (IS To be completed by ISA or RPF	SA) / Registered Professional Forester (RPF)						
Name of ISA or RPF:	ISA certification # or RPF member # :						
I confirm that the tree(s) on this application:							
	e(s) with minimum diameter of 10 cm laced with native tree (either potted stock or caliper-sized up to 50mm diameter)						
Comments:							
Signature:	Date:						
	manytrees are being removed, what size and species is being planted as lines for details on what is required for your project.						
Total estimated cost (excluding taxes): \$	(An itemized quote must accompany your application)						

8. Sketch Sheet

Please Provide:

- a) Location of home and existing tree(s) to be removed;
 b) Location of new replacement native tree(s);
 c) Location and distance of all buildings, wells, septic systems, lot lines, roadways, etc, and
 d) Any applicable features such as height and width of tree, and any other dimensions outlined in your project section.

9. Municipal Freedom of Information and Protection of Privacy Act

Information provided by the applicant on the application form, or as support material with the application, may be made available to Program staff. Application forms will be retained on file regardless of whether or not funding is granted. The names of all applicants may be made public as a result of submissions under the Municipal Freedom of Information and Protection of Privacy Act.

Information collected on this form or as support material may become part of a public document if your project receives grant funding from the Tree Replacement Program.

10. Disclaimer

Although the City of Ottawa (The City), its staff, South Nation Conservation (SNC), and the SNC's staff and Program Representatives may provide information regarding the practices and structures eligible for funding through the Tree Replacement Program, it is the responsibility of the applicant, in cooperation with their consultant to ensure that the practices undertaken are suitable to the applicant's property and are technically and structurally adequate. Each applicant must also ensure that all approvals, permits or other requirements under applicable laws, regulations and by-laws have been obtained prior to construction.

The City, its staff, South Nation Conservation (SNC), and the SNC's staff and Program Representatives are not liable for any claims, damages or loss whatsoever against the City or any other party arising from the use or non-use of any advice or information provided as part of, or under, this program. The City, in granting or denying an application for a project under this program, does not comment on nor guarantee the environmental condition of the subject properties.

To the best of my knowledge, the information contained in this form is true and accurate.

I hereby declare that I have no immediate family relationship or business interest with any individual or company supplying labour or machinery use for the completion of this project.

I hereby declare that I have read, understood, and agreed with the above disclaimer.

If approved, I hereby greporting purposes:	rant permi	ssion to t	he Tree Replacement Program to use the following for promotional and
My name My project location My project photos	☐ Yes ☐ Yes ☐ Yes	□ No	
Applicant Name (please	print):		
Applicant Signature:			Date: