



DAHLIA O. VERTREESE
MAYOR

TOWNSHIP OF HILLSIDE
DEPARTMENT OF PUBLIC WORKS
274 HILLSIDE AVENUE
HILLSIDE, NJ 07205
(973) 926-1110

ANTHONY RUSSOMANNO
ACTING DIRECTOR

Application for Tree Removal, Pruning or Trimming Permit

Chapter 282. Tree Removal 282-5

Application Date: _____

Please select: Tree Removal ____ Pruning ____ Trim ____

Homeowners Name: _____ Telephone #: _____

Homeowners Signature: _____ Date: _____

Scheduled Work Date: _____ Date Completed: _____

Address of Tree: _____

Location of Tree: _____

Contractor's Information (Responsibility of Homeowner)

Name: _____ Address: _____

Contractor's License #: _____

Email Address: _____

Tree Species: _____ Reason for Removal: _____

Diameter of the center trunk measured four feet from the ground: _____

*Please sketch the location of the home or business on a separate piece of paper. Show the home or business in relation to the street. Sketch the driveway indicating the front dwelling and locate the tree/trees with an X.



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Permit Fee: \$25.00

Forms of acceptable payment: Checks Only

Please make out to: The Township of Hillside

Mail monies to the address listed above or can be dropped off at DPW location.
Please call at anticipated arrival so application and monies can be collected.

SPECIAL NOTES (Office Use Only)

Homeowner Signature _____ Date _____