



**APPLICATION FOR APPROVAL TO CUT TREES**  
(under the provisions of By-law 137-2006)

TC

**Planning and Development Services**  
65 Harwood Avenue South  
Ajax ON L1S 2H9

Tel. 905-683-4550  
Fax. 905-686-0360  
www.ajax.ca

FOR TOWN USE ONLY	
File Number	Date of Receipt

**1. Submission Requirements**

**Information Requirements**

- One (1) copy of this application is to be submitted to the Town of Ajax Planning and Development Services, 65 Harwood Avenue South, Ajax, Ontario L1S 2H9.
- One (1) copy of a consent letter from Owner (if applicable).
- Three (3) copies of a legal plan of survey and a plan showing the location of the trees to be cut.
- Three (3) copies of an Arborist Report and/or Tree Inventory and Preservation Plan (if applicable).

**Fees**

- An application fee, in accordance with the Planning Act Fees and Charges By-law, as amended, payable to the Town of Ajax, is required. Payments may be made by cheque, cash or money order.

(Under the authority of the "Planning Act Fees and Charges By-law", as amended) **Fee Submitted: \$** \_\_\_\_\_

**Refund Policy**

(Under the authority of the "Planning Act Fees and Charges By-law", as amended)

A refund of Town of Ajax Application fees will be calculated as follows:

- Where an application is withdrawn after a file has been opened, but before it has been circulated: 90%
- Where an application is withdrawn after a file has been circulated, but before it has been considered at a public meeting: 50%
- Where an application is withdrawn after the file has been considered at a public meeting: No refund

**2. Contact Information**

	Mailing Address	Telephone	Facsimile	E-mail
Owner		( )	( )	
Applicant		( )	( )	
Agent or Primary Consultant		( )	( )	
Other: (specify)		( )	( )	

Correspondence relating to this application should be sent to (select one only): <input type="checkbox"/> Owner <input type="checkbox"/> Applicant <input type="checkbox"/> Agent or Primary Consultant <input type="checkbox"/> Other	The applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Lessee of Land or Tenant <input type="checkbox"/> Prospective Owner
If the applicant is a <b>bona fide farmer</b> , (a person who has a current and valid farm registration number under the Farm Registration and Farm Organizations Funding Act, 1993, S.O. 1993, c.21, as amended), please provide the Farm Business Registration Number:	
If the applicant is not the Owner, the Owner <b>must consent</b> to the proposed tree cutting  <input type="checkbox"/> Separate Letter of Authorization attached	Owner's Signature:  Date:

### 3. Property Information and Current Planning Status

<b>Location and Description</b>			
Municipal Address			
Lot/Part #		Plan/Concession #	
Assessment Roll # & PIN #			
Land Use Designation in the Town of Ajax Official Plan:		Existing Zoning:	
Land under area described in Schedule A of the By-law or Zoned EP, OS, POS or a Park		<input type="checkbox"/> Yes	<input type="checkbox"/> No

### 4. Details of Proposed Tree Cutting

<b>Estimated Land Area Proposed for Tree Removal</b> (If it is a "Woodland" area greater than 1 hectare (ha) or 1000 m <sup>2</sup> in size – check with Durham Regional Tree By-Law)	m <sup>2</sup>			
<b>Number of existing trees to be removed</b>				
<b>Total DBH (Diameter at Breast Height) of existing trees to be removed.</b>	cm			
<b>Species list of trees to be removed</b>  Provide a simple list of trees to be removed, including species type, diameter at breast height in cm, and current health status in good, fair or poor condition.  (If the number of trees to be removed is more than 5 trees or the number of species to be removed is more than 2 species, an <b>Arborist Report</b> and/or <b>Tree Inventory and Preservation Plan</b> is required as part of the application.)	<b>Tree #</b>	<b>Species</b>	<b>DBH (cm)</b>	<b>Health (G/F/P)</b>
	1)			
	2)			
	3)			
	4)			
	5)			

<b>Distance of trees from rivers, streams, wetlands and wood lots</b>	m	
<b>Rational for Proposed Tree Removal</b>  (e.g. development outside of site plan control area, farm operation for the injury or destruction of more than 5 trees each calendar year, non-emergency work, removal of trees that are not diseased, dead or hazardous tree, removal of trees that are not classified as Orchard, Christmas Tree Farm or Tree Nursery or removal of trees that are not deemed as good forestry practices ...etc.) Refer to Tree Protection By-law for definition, provisions, and exemptions.		
<b>Date the cutting is proposed to take place</b>	Expected Start Date:	Expected Completion Date:
<b>Name of Arborist / Landscape Architect for preparing report and or plans (if applicable):</b>	Mailing Address	
	Telephone	E-mail
<b>Name of logging Arborist / Contractor (if applicable):</b>	Mailing Address	
	Telephone	E-mail
<b>Arborists Report / Tree Inventory &amp; Preservation Plan Attached.</b> (If No, is it required to be submitted later? Yes / No)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Replanting Plan Attached</b> - if applicable. (If No, is it required to be submitted later? Yes / No)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

## 5. Declaration

I hereby certify that all statements contained within this application are true and agree to allow Town staff reasonable access to the property, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect under an oath and by virtue of the Canada Evidence Act.

I hereby certify that I understand where tree(s) are to be injured or destroyed, the Town may issue a Permit subject to conditions that ensure all other trees are protected in accordance with good arboricultural practices and may require a replanting plan to replace any trees, and/or collect cash in lieu, and/or require securities for replanting and maintaining the trees for a period of two years.

I hereby certify that I understand the Town may require the applicant to post the notice of application on the property where the tree(s) are located.

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Signature of Owner or Applicant

Date

Personal information contained on this form is collected under the authority of the Planning Act, RSO 1990, c. P13 and the applicable implementing Ontario Regulation, and will be used to evaluate the Application for Approval to Cut Trees. Questions about the collection of personal information should be directed to the Records Manager/FOI Coordinator, 65 Harwood Avenue South, Ajax, Ontario, L1S 2H9, (905) 683-4550, ext. 3343.

If you have any comments on the format or content of this application form, please complete a Customer Feedback Form, which is available at Planning and Development Services, Town of Ajax.