



# AMHERST Massachusetts

TOWN HALL • 4 BOLTWOOD AVENUE • AMHERST, MA 01002-2302

Planning Board/Tree Warden

## SCENIC ROAD SHADE TREE/ STONE WALL REMOVAL APPLICATION

**For Office Use Only:**

Application #: \_\_\_\_\_ Received by Planning Dept: \_\_\_\_\_  
 Reference #: \_\_\_\_\_ Public Hearing Date: \_\_\_\_\_  
 Fee Paid: \$ \_\_\_\_\_ Decision Date: \_\_\_\_\_

**APPLICANT INFORMATION:**

Applicant: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**PROPOSAL:**

Location of tree(s) or stone wall(s) to be removed/impacted:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Species and size of tree(s): \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for requested removal/impact:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PROPERTY INFORMATION:**

Property Address/Description:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PROPERTY OWNER:**

\_\_\_\_\_  
*(if different from applicant)*  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

***File this completed form and \$75 with the Planning Department in Town Hall.***

\_\_\_\_\_  
 Signature of applicant(s)