

CITY OF FLUSHING
APPLICATION FOR PLANTING TREES
IN CITY RIGHTS OF WAY

Date _____

Name _____ Phone Number _____

Applicant Address _____

Address Location of Proposed Planting (if different) _____

Number of trees to be planted _____

Type of trees to be planted _____

Tree maintenance proposed _____

Please attach a scaled diagram of the property, showing the locations of proposed plantings, drive approaches, utility lines, sidewalks and right-of-way width dimensions.

To be completed by City Forester or designee

Date Received _____

Approved/Denied _____