

Department of Public Works

Streets Division – Urban Forestry

Charlie Romines, Superintendent 1402 Wingra Creek Pkwy. Madison, WI 53715 Phone: (608) 266-4816 | Fax: (608) 267-8696 streets@cityofmadison.com cityofmadison.com/forestry

SECTION 1 – APPLICANT AND CERTIFIED ARBORIST INFORMATION

Street Tree Report – Land Use Application

In exercising its responsibility under the foregoing ordinances and Department Of Public Works construction specifications, the Forestry Section requires the applicant to submit a Street Tree Report from a certified arborist as part of a <u>Land Use Application</u> submittal. The Forestry Section will evaluate the report below for street tree protection during construction activities, proposed tree removals and deposits for developers' agreements as part of the forestry approval process. If it is necessary to remove a street tree, a separate permit from Forestry will be required. The Forestry Section must be informed of any change in this information as it could impact the Forestry Section's report and approval.

Please note on the **proposed plan** any pruning beyond what is considered to be acceptable by **ANSI A300 pruning standards** or if street tree removal may be necessary due to the impacts of construction, staging/delivery areas, or other activities.

APPLICANT NAME Allison Mills BUSINESS PHONE 314-412-7390 CELL PHONE EMAIL millsa@realcrg.com MAILING ADDRESS 35 E. Wacker Dr. Suite 1300 STATE_IL ZIP 60601 CITY Chicago **CONSULTING CERTIFIED ARBORIST** CERTIFIED ARBORIST NUMBER <u>WI-1598A</u> NAME Eliot Gore BUSINESS PHONE 6088213971 CELL PHONE EMAIL egor@vierbicher.com MAILING ADDRESS 600 W. Virginia St STATE_wi ZIP 53024 CITY Milwaukee **WORK LOCATION:** STREET ADDRESS 413-417 W Mifflin St., 418-446 W Washington Ave. CROSS STREETS N Bassett St., N Broom St.

SECTION 2 – STREET TREE INVENTORY AND CONSTRUCTION IMPACT

STREET TREE NUMBER	Tree Species (Common Name)	Trunk Diameter (DBH)	Canopy Spread (Ft)	Trunk/Roots: General Structure/Health/ Condition	Removal (R) Requested by Applicant? (Yes or No) *Photos required*	Pruning by City Forestry requested (Yes or No). Note: Any Pruning must follow ANSI A300 Standards.	What are the impacts of proposed building? i.e., construction, staging, underground vaults, concrete pumps, scaffolding, new underground utilities, etc.	What are the earth retention impacts to the street trees?
1	Locust	30"	50'	Good Health/Structure	□Yes ⊠No	□Yes ☑No	N/A	N/A
2	Locust	30"	50'	Good Health/Structure	□Yes ⊠No	□Yes ⊠No	N/A	N/A
3	Locust	28"	45'	Good Health/Structure	□Yes ⊠No	□Yes ⊠No	N/A	N/A
4	Locust	28"	36'	Good Health/Structure	□Yes ⊠No	□Yes ⊠No	N/A	N/A
5	Locust	28"	36'	Good Health/Structure	□Yes ⊠No	□Yes ⊠No	N/A	N/A
6	Locust	28"	36'	Good Health/Structure	□Yes ⊠No	□Yes ⊠No	N/A	N/A
7	Littleleaf Linden	15"	25'	Good Health/Structure	□Yes ⊠No	□Yes ⊠No	N/A	N/A
8					□Yes □No	□Yes □No		
9					□Yes □No	□Yes □No		
10					□Yes □No	□Yes □No		

Please attach a plan of the proposed project site that includes street trees corresponding to the street tree listed in Section 2 of Street Tree Inventory. Additional notes: Describe impacts and any mitigation actions employed: All trees are to be protected with fencing during all phases of demolition and cunstruction. All work completed within the street terrace should be done in a way that minimizes impact to below ground root structures. **SECTION 3 – PHOTO DOCUMENTATION** Please attach photos. The group of photos must include: A photo to best depict the street tree relative to the proposed project. Date and timestamp of when photo was taken. SIGNATURE CERTIFICATION I hereby certify that I have presented an accurate and truthful representation of the proposed building and construction impacts to City street trees and a complete inventory of affected street trees and their condition herein, and that I will update this information and this report should any of this information change. I have worked to ensure compliance with all accepted professional standards in arboricultural practices and to ensure compliance with all applicable laws, regulations, policies and ethical standards. In the event the contractor has failed to comply with all applicable laws, regulations, policies and ethical standards; or created conditions that may present a hazard to people or property, I have immediately notified the appropriate representative of City of Madison Forestry Section at (608)266-4816. WI-1598A CONSULTING ARBORIST SIGNATURE ISA CERTIFICATION # **DEVELOPER APPLICANT SIGNATURE** DO NOT WRITE BELOW THIS LINE CITY OF MADISON FORESTRY SECTION OFFICE USE ONLY: CONSULTING ARBORIST REPORT REVISED DATE APPROVED REJECTED DATE: CITY EMPLOYEE NAME _____

DEPOSIT REQUIRED \$ _____

SIGNATURE OF CITY EMPLOYEE _____

Street Tree Report - Land Use Application

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LIST OF ADDITIONAL STREET TREE INVENTORY AND CONSTRUCTION IMPACT

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