



Street Tree Removal Permit

25 Center Street

Vermillion, SD 57069

Ph: 605-677-7050 Web: vermillion.us

Property Owner: _____ Date: _____

Property Address: _____

Phone: _____

Date of planned removal: _____

Number of trees to be removed: _____

Type(s) of tree to be removed: _____

Location on property of tree(s) to be removed: _____

I, _____, hereby request permission to remove a tree(s) in the street right-of-way adjacent to my property. I have read the attached Ordinance and agree to abide by its requirements.

Additional comments of property owner: _____

CITY TREE SPECIALIST

Permission accepted

Permission declined

Removal approved by: _____ Date: _____

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