



APPLICATION FOR PERMIT

Request Permission to have removed Application No. <u>β-2004 - 16</u>

Date: <u>6-21-04</u> CITY OF MOBILE OFFICE OF TREE COMMISSION 2. Owner (if different from applicant): 1. Applicant: Name Thelma M. Bowen Name Address 2200 Freemont Dr. W! Address Mobile, AL 36609-7056 Telephone Number 661-7551 Telephone Number 3. Location of Tree: Fairwood Dr. right of way 4. Type of Tree: Tulip Poplar Trim: Remove: X 5. Approximate Diameter four (4) feet from the ground: 32ft. Height: pretty tall 6. Reason for Removal or Trimming as Requested: leaning into adjoining Thelma M. Bowen

Application Fee - None

Applicant must be present at meeting to represent request.

All supporting information must be submitted with the application by filing date.

Appeals must be made in writing to the City Clerk's office within 15 days of the meeting.

Major projects involving multiple trees may be held over to the following month's agenda due to the time required by staff to investigate.

Owner - if different from applicant





APPLICATION FOR PERMIT

CITY OF MOBILE OFFICE OF TREE COMMISSION	Application No. <u>β-2004-16</u> Date: <u>6-21-04</u>
1. Applicant: 2.	Owner (if different from applicant):
Name Thelma M. Bruen	Name_
Address 2200 Freemont D. W.	Address
Mobile AC 36609-7056	
Telephone Number 661-7551	Telephone Number
3. Location of Tree: Friend Dr. right of way 4. Type of Tree: (2) Bradford pears Trim: Remove: X 5. Approximate Diameter four (4) feet from the ground: 3pt Height: paly	
. 8770L	ner"-Removing 2 Would = todo better. Thelma M. Bowen oplicant
Application Fee - None	vner – if different from applicant

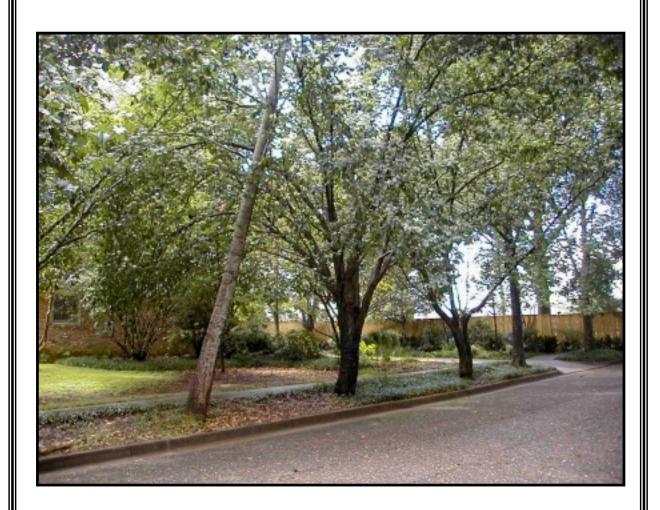
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Date: October 19, 2004 Application No.: P-2004-16



LOCATION: 2200 Freemont Drive West

<u>TREE HEALTH</u>: Poplar Tree is leaning. Two Bradford Pear Trees are healthy.

<u>SITUATION</u>: Applicant is requesting to remove leaning Poplar and two Pear Trees to allow remaining trees to fill in.

STAFF RECOMMENDATION: Staff recommends approval of the removal of trees at applicant's expense.

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