



***Town of Holden***

***MASSACHUSETTS***

*Holden Municipal Light Department*

1 Holden St. • Holden, MA 01520

James Evers  
TREE WARDEN

TELEPHONE (508) 210-5400  
Email: jevers@holdenma.gov

**PUBLIC SHADE TREE REMOVAL APPLICATION**

Owner: \_\_\_\_\_

Property Address: \_\_\_\_\_

Reason for removal request/ project description: (attach additional plans or description if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tree Species: \_\_\_\_\_ Tree Diameter (measured at DBH): \_\_\_\_\_

1. I am/We are the record owner(s) of the lot referenced above.
2. I am/We are requesting that the Tree Warden grant permission to remove a Public Shade Tree owned by *The Town of Holden* located adjacent to my/our property.
3. I/We understand that per Massachusetts General Law Chapter 87 the Tree Warden is required to conduct a public hearing. If at or before the public hearing written objection is received by the Tree Warden the removal of the tree shall be denied. I/We understand that all costs of the hearing shall be borne by the applicant.
4. I/We understand that if approval is granted for the removal of the tree(s) I am/We are responsible for the removal of the tree including all associated costs.
5. I/We understand that if approval is granted for the removal of the tree(s) I am/We will compensate the Town of Holden for the loss of each tree by providing a replacement tree within 6 months of removal in accordance with the Tree Warden's guidelines.

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The request to REMOVE the public tree(s) indicated above has been:

☐ APPROVED- The Following Conditions shall apply: \_\_\_\_\_

☐ DENIED

Tree Warden's Signature: \_\_\_\_\_ Date of Action: \_\_\_\_\_

*If approved, the removal of tree(s) must take place within 120 days. The Tree Warden reserves the right to change this decision at any time and will provide verbal and/or written notification to the applicant of this change.*

