

Community Development Department Planning Division

100 Civic Center Way Calabasas, CA 91302 T: 818.224.1600 F: 818.225.7329

www.city of calabas as.com

OAK TREES

Supplemental Application

For Oak Tree Permits, Minor (Healthy) Oak Tree Permits and Retroactive Oak Tree Permits

OAK TREE PERMIT SUMMARY

| Request is for: Encroachment into protected zone | | Removal | | | | | | | |
|--|-----------------------------|----------------|-----------|--------------|--|--|--|--|--|
| of Trees Impacted: Encroachments | | Removals | Removals | | | | | | |
| % of Protected Zone encroad | ched upon: | | | | | | | | |
| Tree Species: | Valley Oak | Coast Live Oak | Scrub Oak | | | | | | |
| | | | | | | | | | |
| MINOR (HEALTHY) OAK TREE PERMIT SUMMARY | | | | | | | | | |
| | | | | | | | | | |
| No. of Oak Trees to be pruned: | | | | | | | | | |
| Estimated no. of branches to be | e pruned: | | | | | | | | |
| Size range of diameter of branc | hes to be pruned: | | | | | | | | |
| Person/company performing th | ne work: <i>(Complete B</i> | elow) | | | | | | | |
| Name | e: | | | | | | | | |
| Addres | s: | | | | | | | | |
| Cit | y: | State: | Zip Code: | | | | | | |
| Phone | e: | Fax: | | | | | | | |
| Cell / Other Phone | e: | E-mail: | | - | | | | | |

For Healthy Oak Tree Permits complete the diagram on Page 3

Page 1 of 5 Revised: 5/2010

RETROACTIVE OAK TREE PERMITS

(To be completed only if work was done previously without a permit.)

| 1. | Does this project impact Scrub Oak: | Yes | _ | No | | | | | |
|-----|---|---|-----------|----------------|--|--|--|--|--|
| | If this Application is for Shrub Oak Habitat | only, go directly to item 9 belo | w. | | | | | | |
| 2. | How many Oak trees are Impacted: | | | | | | | | |
| 3. | What Species are the impacted Trees: | Valley | Oak | Coast Live Oak | | | | | |
| 4. | What is the approximate size of the trunk(| (s): | _ | | | | | | |
| 5. | How many Oak Trees have been removed: | | | | | | | | |
| 6. | How many Oak Trees have been pruned: | | | | | | | | |
| 7. | Estimate number of branches pruned: | | | | | | | | |
| 8. | Size range of diameter of branches pruned | d: | | | | | | | |
| 9. | Are trees adjacent or on a slope: | Yes | | No | | | | | |
| 10. | What was the purpose of the Oak Tree rer (use additional sheets if necessary) | noval or pruning: | | | | | | | |
| 11. | When was work performed: | | | | | | | | |
| 12. | Who performed work: (Complete Below) | | | | | | | | |
| | Name: | | | | | | | | |
| | Address: | | | | | | | | |
| | City: | State: | Zip Code: | | | | | | |
| | Phone: | Fax: | | | | | | | |
| | Cell / Other Phone: | E-mail: | | | | | | | |
| 13. | If different from the applicant, who author | rized the work: (Complete Belo | w) | | | | | | |
| | Name: | | | | | | | | |
| | Address: | | | | | | | | |
| | City: | State: | Zip Code: | | | | | | |
| | Phone: | Fax: | | | | | | | |
| | Cell / Other Phone: | E-mail: | | | | | | | |
| 14. | Please complete the diagrams on page two (for information on how to complete this section | | nnaire | | | | | | |
| | Address the following: | | | | | | | | |
| | Indicate on the tree or shrub oak plot plan the approximate location of the impacted tree(s). | | | | | | | | |
| | Indicate on the plan view and elevation view the extent of the impacted foliage. | | | | | | | | |
| | Indicate on the elevation view any im | Indicate on the elevation view any impacts to the oak tree drip line. | | | | | | | |

Page 2 of 5 Revised: 5/2010

Shade area(s) of tree affected.

FOR INFORMATION ON HOW TO COMPLETE THIS SECTION, SEE EXAMPLES ON PAGE 4

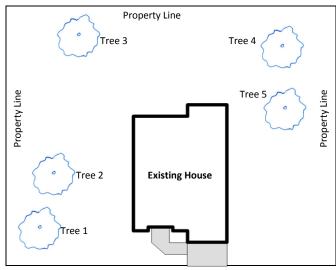
Oak Tree Plot Plan Scrub Oak Plot Plan (complete below or attach additional sheets) (complete below or attach additional sheets) Property Line **Property Line Property Line Property Line** Public Sidewalk or Street Frontage Public Sidewalk or Street Frontage Plan View Tree No.: **Elevation View** Tree No.: (complete below or attach additional sheets) (complete below or attach additional sheets)

Shade area(s) of tree affected.

Page 3 of 5 Revised: 5/2010

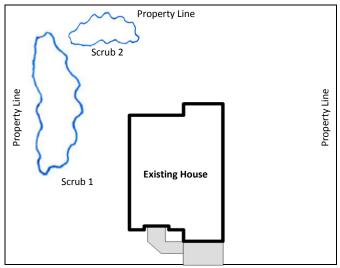
Plan Example:

Oak Tree Plot Plan



Public Sidewalk or Street Frontage

Scrub Oak Plot Plan



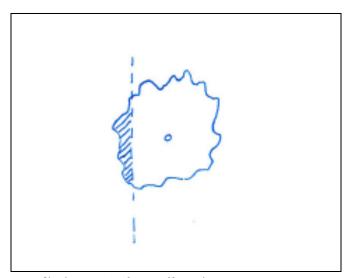
Public Sidewalk or Street Frontage

Plan View

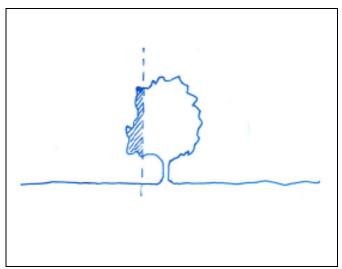
Tree No.:

Elevation View

Tree No.:



Shade area(s) of tree affected.



Shade area(s) of tree affected.

Page 4 of 5 Revised: 5/2010



Community Development Department Planning Division

100 Civic Center Way Calabasas, CA 91302 T: 818.224.1600 F: 818.225.7329

www.city of calabas as.com

Application Filing Requirements SUBMITTAL CHECKLIST

MINIMUM APPLICATION FILING REQUIREMENTS

This checklist will be used by staff to determine if an application contains the appropriate materials and documents to begin the application process. All items listed below must be included. If any items are not included the project will not be accepted for submittal. This checklist is not used to determine whether a project application is complete for purposes of the Permit Streamlining Act.

| Oak Tree Permit: | | | Minor (Healthy) Oak Tree Permit: | | |
|------------------|--|--|---|--|--|
| | Completed General Land Use and Development Application and filing fees. | | Completed <i>General Land Use and Development Application</i> and filing fees. | | |
| | Completed Supplemental Application – Oak Trees. | | Completed Supplemental Application – Oak Trees. | | |
| | Two (2) copies of an Oak Tree Location Map prepared in accordance with the City's Oak Tree Preservation Guidelines. Two (2) copies of an Oak Tree Report. The applicant shall submit an oak tree report, prepared by a city-qualified arborist prepared in accordance with the City's Oak Tree Preservation Guidelines. | | Any other plans or information that the Communit Development Director deems necessary to facilitat processing of the application. APPLICATION REVIEW AND APPROVAL BODIES: Community Development Director | | |
| | | | | | |
| Note | : For a list of individuals/companies that are qualified to prepare an Oak Tree Report, contact the City of Calabasas Planning Division. Additional Copies of the final Oak Tree Report may be required to be submitted prior to scheduling of hearing before the Planning Commission. | | | | |
| | Public hearing information prepared in accordance with the <i>Public Notice Requirements</i> . | | | | |
| | Any other plans or information that the Community Development Director deems necessary to facilitate processing of the application. | | | | |
| | APPLICATION REVIEW AND APPROVAL BODIES: Community Development Director, Planning Commission or City Council (depending on nature of request) | | | | |

Page 5 of 5 Revised: 5/2010