



**TOWN OF IRVINGTON**

P.O. Box 174  
Irvington, VA 22480  
(804) 438-6230  
[info@irvingtonva.gov](mailto:info@irvingtonva.gov)

**TREE REMOVAL PERMIT APPLICATION FORM**

Town of Irvington, Virginia, Code of Ordinances PERFORMANCE STANDARDS as defined in Sec. §154.153 (B)(2)(a); Existing trees over six inches in diameter at breast height (DBH) shall be preserved outside the construction footprint. Diseased trees or trees weakened by age, storm, fire or other injury may be removed when approved by the Zoning Administrator.

Applicant Name \_\_\_\_\_ Name of Property Owner (if different) \_\_\_\_\_

Property Location \_\_\_\_\_

Applicant Contact Information Email \_\_\_\_\_ Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Tax Map Parcel Number \_\_\_\_\_ Zoning Classification \_\_\_\_\_

**CONDITION OF TREE(S) TO BE REMOVED**

- Diseased     Damaged     Dead     Over Hanging

**NATURE OF APPLICANT:**

- Business     Church     School     Non-Profit     Residence

Tree Location(s) \_\_\_\_\_

N  E  S  W    Side of State Road # (i.e. Route 200) \_\_\_\_\_    Nearest Cross Street \_\_\_\_\_

Applicant (s) Signature \_\_\_\_\_

<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	For Office Use Only	_____ Permit Number
Reason _____			
Zoning Administrator _____		Date _____	