

**ALLENDALE SHADE TREE COMMISSION  
WORK REQUEST FORM**

**NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PROPERTY ADDRESS** \_\_\_\_\_

**CONTACT NUMBERS:** (HOME) \_\_\_\_\_  
(WORK) \_\_\_\_\_

**TYPE OF TREE (IF KNOWN) AND SIZE:** \_\_\_\_\_  
(DIAMETER AT BREAST HEIGHT)

**NATURE OF WORK INDICATED (eg. Removal, pruning)** \_\_\_\_\_

**ELECTRIC LINE INVOLVED?** YES \_\_\_\_\_ NO \_\_\_\_\_

\*\*\*\*\*

**FOR SHADE TREE COMMISSION USE**

**SITE INSPECTED:** \_\_\_\_\_

**OBSERVATIONS AND TREE CONDITION:** \_\_\_\_\_

**RECOMMENDED ACTION:** \_\_\_\_\_

**STUMP REMOVAL?** YES \_\_\_\_\_ NO \_\_\_\_\_

**HOMEOWNER ADVISED:** \_\_\_\_\_

**WORK BID:** \_\_\_\_\_

**WORK SCHEDULED:** \_\_\_\_\_

**WORK COMPLETED:** \_\_\_\_\_

**FUTURE PLANTING SITE?** YES \_\_\_\_\_ NO \_\_\_\_\_