



City of Brisbane  
 Community Development Dept.  
 50 Park Place  
 Brisbane, CA 94005  
 (415) 508-2120

City Hall Hours: M-T-Th 8-5, W 8-8, F 8-1

RECEIVED  
 JAN 16 2020

7-Day Notice from Owner to City:  
 For Severe Tree Trimming or  
 Removal of Non-protected Mature Tree

**Applicability:** Brisbane Municipal Code Section 12.12.050.A allows that following submittal of a 7 calendar day notice to the Community Development Department (CDD), any species of tree may be severely trimmed (as long as the trimming would not result in the death of the tree) and certain tree species may be removed. This form serves as that required notice. A date stamp from the CDD on this form is required for the notice to be considered effective. Approval will be implicit after 7 days, unless the City contacts the owner or owner's agent listed on this form within the 7 day time period to indicate that the severe trimming or removal may not proceed. For information on trees subject to noticing only and standard conditions, please see pages 3 and 4 of this handout. Note that the CDD will require access to view the tree for verification of the information provided herein. Also, failure to provide adequate or correct contact information will invalidate this notice.

This form may only be used for trees meeting the criteria provided in the BMC Chapter 12.12. It shall **not** be used for trees located in the public right-of-way, or on any property owned by others who are not listed and signed on to this form.

Address of Tree(s) Proposed for Removal 190 Santa Clara St

If notice is for removal, is the tree a Protected Tree (see definitions on page 3 of this form)?  Yes  No  
 If you answered "Yes" to the above, please STOP and complete an Application for Protected Tree Removal instead.

Photo ID #	Trimming or Removal (T or R)	Species (Scientific and Common Name)	Invasive (Yes/No). If yes, cite reference.	Tree circumference at 2 Ft. above Grade	Description of Tree Location
	R	Italian Stone Pine	N	approx 5ft	front yard

Attach a photo of each tree, keyed to a site plan or aerial photo indicating the location of each tree to be trimmed or removed for field verification. Required attachments:

- Site plan or aerial photo showing tree locations(s) and  One or more photos of each tree

Owner's Information:

Diane Glazman  
 Owner First Name Last Name  
 \_\_\_\_\_  
 Mailing Street # Mailing Street Mailing City Mailing State Mailing Zip  
 \_\_\_\_\_  
 Email \_\_\_\_\_ Phone \_\_\_\_\_