



URBAN PLANNING AND ENVIRONMENT  
MUNICIPALITÉ DE MORIN-HEIGHTS  
567, CHEMIN DU VILLAGE  
MORIN-HEIGHTS (QUÉBEC) J0R 1H0  
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## APPLICATION FORM FOR AN AUTHORIZATION CERTIFICATE

F-Urb-01

### TREE FELLING

<b>WORK SITE LOCATION</b>	
Address and/or street name	Lot N°
Current use : <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Mixed <input type="checkbox"/> Other : _____	
Waterfront property adjacent to a lake, watercourse or wetland: <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>APPLICANT'S IDENTIFICATION AND CORRESPONDENCE ADDRESS</b>	
Applicant's first and last name	
Postal address	Postal code
City	
Cell N°	Other phone N°
Email	
The applicant is the owner* : <input type="checkbox"/> YES <input type="checkbox"/> NO *If no: please complete the AUTHORIZATION section on the back.	
<b>WORK DESCRIPTION</b>	
Tree: Any woody plant whose trunk diameter, measured 1 meter above the ground, is greater than 10 cm or whose stump diameter is greater than 15 cm.	
Number of trees to be felled	
Location	<input type="checkbox"/> Front yard; number: _____ <input type="checkbox"/> Back yard; number: _____ <input type="checkbox"/> Side yard; number : _____
Diameter of the trees to be felled	_____ cm or Between _____ cm and _____ cm
Species of trees to be felled	<input type="checkbox"/> Birch <input type="checkbox"/> Maple <input type="checkbox"/> Oak <input type="checkbox"/> Fir <input type="checkbox"/> Spruce <input type="checkbox"/> Pine <input type="checkbox"/> Ash <input type="checkbox"/> Other : _____
Motive(s) for removal	<input type="checkbox"/> The tree must be cut down for the installation of authorized buildings, constructions, or structures; <input type="checkbox"/> The tree is located within a 5-meter strip around an existing main building or within a 2-meter strip around an existing accessory construction or structure; <input type="checkbox"/> The tree is dead or in a state of irreversible decline; <input type="checkbox"/> The tree must be cut down due to the risk of spreading a disease or is an invasive exotic species; <input type="checkbox"/> The tree must be cut down due to an irreversible condition caused by disease, a structural deficiency affecting its stability, or serious damage it causes to property.
Replanting	<input type="checkbox"/> Replacement of felled trees <input type="checkbox"/> Without replacement of felled trees Number of tree(s) replaced: _____

Please complete the reverse side →

Additional information to support project understanding:

Work start date (DD/MM/YYYY)	Work end date (DD/MM/YYYY)	Estimated cost
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#### WORK EXECUTANT

<input type="checkbox"/> Contractor (if checked fill in the section below)	<input type="checkbox"/> Self-construction
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Company name	Company phone N°
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Company address
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Company email	RBQ licence N°
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#### REQUIRED DOCUMENTS **The application and all required documents must be submitted as one (1) printed copy to scale and one digital copy (PDF format)**

- A proposed site plan** identifying the location of the trees to be cut down (you may use a copy of your property location certificate)
- Photographs** identifying each tree to be felled;
- A Document** justifying the need for tree removal.

#### COST OF AN AUTHORIZATION CERTIFICATE

Tree cutting (residential)	No fees or \$30 / per tree cut down in the front yard if not replaced
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#### IMPORTANT

The inspector assigned to the file reserves the right to require any additional documents, estimates, reports, or plans necessary to ensure the compliance of the application.

#### APPLICANTS SIGNATURE

The undersigned declares that the information provided above is accurate and acknowledges having read the applicable municipal regulations.

**The undersigned understands that it is mandatory to obtain a permit or authorization certificate before starting any work or use, and that this form does not, at any time, constitute approval or authorization.**

Applicant's signature	Date (DD/MM/YYYY)
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#### OWNERS AUTHORIZATION

MANDATORY when the applicant is different from the owner or when the owner is a legal entity (e.g., a company).

Owners phone number : \_\_\_\_\_

I \_\_\_\_\_, owner, authorize \_\_\_\_\_ to \_\_\_\_\_  
(Owners name in block letters) (Applicants name in block letters)

Submit and sign on my behalf this application for an authorization certificate for my property located at

\_\_\_\_\_  
(Project address or lot number)

Signed on: \_\_\_\_\_ Signature : \_\_\_\_\_  
(Date) (Owners signature)