CITY OF ABBEVILLE LANDSCAPING APPLICATION



Date:		
Applicant Name:		
Mailing Address:		
Phone #:		
Email:		
Address of Landscaping:		
Attach Landscape Design Plan (must in	slude):	
location of the trees and Locations and dimension of the trees and plant ma Location and calipers of An explanation of how exconstruction; and a press A representation of the material Trees are prohibited with Minimum clearances/sep Class A Trees Class B Trees	aration distances measured horizontally from trees to overhead utility lines shall be - 30 ft	
	ion will be signed electronically when I type my name in the signature box AND select the my electronic signature means that I intend to apply for this permit/application and have ate information.	
best of my knowledge. I understand that	y that I have examined all the information on this application, and it is true and correct to the tanyone who knowingly gives a false or misleading statement about a material fact in this ne else to do so, commits a crime and may be sent to prison or may face other penalties, or	
Signature		_

 $\hfill\Box$ I have read and agree with the statements above.