

TOWN OF NORTH CASTLE TREE REMOVAL APPLICATION PERMIT WHEN A PERMIT IS REQUIRED

The Town of North Castle finds and declares that the preservation of Trees is necessary to protect the health, safety and general welfare of the Town of North Castle because trees provide shade, impede soil erosion, aid water absorption and retention, inhibit excess runoff and flooding, enhance air quality, offer a natural barrier to noise, provide a natural habitat for wildlife, provide screening, enhance property values and add to the aesthetic quality of the community.

A tree removal permit is required under the following circumstances:

1. **Removal of a tree within a property's regulated setback zone or landscape buffer zone (All trees 8" or greater DBH – Diameter at Breast Height)**

The regulated setback zone refers to the area of vegetative screening or landscaping measured from each property line of a residentially zoned property toward the interior of such property.

1. R-4A One-Family Residence District: 25 feet.
2. R-2A One-Family Residence District: 15 feet.
3. R-1.5A One-Family Residence District: 12 feet.
4. R-1A One-Family Residence District: 10 feet.
5. All other residential districts: 5 feet.

2. **Removal of a Significant Tree** - Any tree 24 inches or greater DBH at 4 2 feet.

3. **Removal of any tree in wetlands, within clearing lines, or Conservation Easements.**

4. **Clearing/Thinning** - Any cutting of more than 5 trees of 8 inches in diameter or more in any one quarter-acre area, within a 12 month period with such area being measured as a square with each side measuring 104 feet.

5. **Removal of any street tree within the Right of Way.**

6. **Removal in any calendar year of more than ten (10) trees on any lot.**



TOWN OF NORTH CASTLE

WESTCHESTER COUNTY
17 Bedford Road
Armonk, New York 10504-1898

Tree Removal Permit Application

Telephone: (914) 273-3542 – Planning
(914) 273-8625 – Building
Fax: (914) 273-3554
www.northcastleny.com

PLANNING BOARD
Peg Michelman, Chair

BUILDING DEPARTMENT
Richard Fon, Building Inspector

SUBMIT TO APPLICABLE DEPARTMENT: North Castle Planning Board *or* North Castle Building Department
Town of North Castle, 17 Bedford Road, Armonk, New York 10504

Tracking # _____	For Office Use Only	Permit # _____
Date: ____/____/____		Fee: \$ _____
		Date Issued: ____/____/____

1. IDENTIFICATION OF APPLICANT Date _____

Owner: _____

Phone: _____

Address: _____

Applicant (if other than owner): _____

Phone: _____

Address: _____

Company Removing Trees: _____

Phone: _____

Address: _____

COST OF TREE REMOVAL \$ _____

OWNER SIGNATURE: _____

APPLICANT SIGNATURE: _____
IF DIFFERENT THAN OWNER

2. IDENTIFICATION OF SUBJECT PROPERTY

Address: _____

Abutting Street(s): _____

Tax Map Designation - Section: _____ Block: _____ Lot: _____ Zoning District: _____

3. TYPE OF PROPOSED ACTIVITY

- ___ **Removal of a tree within a property-s regulated setback zone or landscape buffer zone**
- ___ **Removal of a Significant Tree**
- ___ **Removal of any tree in wetlands, within clearing lines, or Conservation Easements Clearing/Thinning**
- ___ **Removal of a Significant Tree Removal of any street tree within the Right of Way**
- ___ **Removal in any calendar year of more than ten (10) trees on any lot**

4. SITE PLAN OR MAP SKETCH

Please provide a copy of a site plan, if available, or a detailed map sketch with subject tree(s) to be removed clearly identified. Existing trees within the area of disturbance should be graphically depicted as being removed or remaining. Trees to be preserved should be graphically depicted as receiving tree protection measures. Each tree within the area of disturbance should be identified with a unique ID number on the site plan. In addition to the graphical depiction of each tree, a Tree Inventory should be submitted. The Tree Inventory should include the Unique ID Number, Species, Size (DBH), Health Condition, and removal status of all trees within the area of disturbance.

5. TREE REMOVAL DESCRIPTION (INCLUDE HOW MANY TREES WILL BE REMOVED)

6. INSURANCE & HOME IMPROVEMENT LICENSE

Worker's Comp _____ (Exp. Date) Liability _____ (Exp. Date) Waiver _____ (Exp. Date)
(Please have the Town of North Castle listed as the certificate holder)

A Westchester County Home Improvement License must be submitted with this application for it to be deemed complete.

7. FUTURE PLANS

Do you have any intention of tearing down a house to build a new house within the next SIX (6) months? Yes No

Do you have any intention to expand a house over 1500 square feet within the next SIX (6) months? Yes No