TREE REMOVAL CHECKLIST

Dear Applicant:

The City of San Marino is known for its magnificent mature trees. These trees are not only important for their beauty and environmental benefits but add considerable value to the City’s residential properties. In order to ensure all required steps are followed for the potential tree(s) removals at your property, please read through and understand fully in order to avoid any delays when the application is submitted to staff for review/consideration. Allow for 7-10 days for staff review once application has been submitted/paid for. Once all requirements are met/confirmed by City staff, the permit must be signed by the owner or authorized person for any replanting requirements. **No work is to begin prior to a fully executed application. A copy of the signed/approved permit must be posted at the site during the work. Failure to post may result in a “Stop Work Notice” being issued.**

Established Tree Definitions:

**Established Tree:** A tree that is not a Heritage Tree or an Oak Tree, that is at least fifteen feet (15’) in height, and whose trunk diameter is at least six inches (6”) at its widest point, when measured at a point four and one-half feet (4.5’) above natural grade.

**Heritage Tree:** A tree that is at least fifteen feet (15’) in height, and whose trunk diameter is at least four inches (4”) at its widest point, when measured at a point four and one-half feet (4.5’) above natural grade, and is one of the following: Platanus racemosa, Juglans californica, Sambucus nigra, Sambucus Mexicana, Aesculus californica, Salix lasiopetis, Populus fremontii, Alnus rhombifolia, Umbellularia californica, or Populus trichocarpa, Ginkgo biloba, Cedrus deodora, Pinus canariensis, Pinus halepensis, Pinus pinea, Pinus thunbergiana, Sequoia sempervirens, Taxodium mucranatum, Calocedrus decurrens, Cupressus sempervirens, Podocarpus gracilior, Magnolia grandiflora, Magnolia x soulangeana, Cinnamomum camphora, Persea americana, Liquidambar styraciflua, Ulmus parvifolia, Ficus microcarpa, Quercus agrifolia, Quercus engelmannii, Quercus ilex, Quercus lobata, Quercus suber, Brachychiton discolor, Brachychiton populneus, Chorisia speciose, Arbutus unedo, Prunus caroliniana, Pyrus kawakamii, Cassia spp, Ceratonia silique, Lagerstroemia indica, Callistemon spp, Eucalyptus citriodora, Melaleuca quinquenervia, Grevillea robusta, Cupaniopsis anacardioides, Koelreuteria spp, Schinus molle, Citrus sinensis, Fraxinus uhdei, Olea europaea, Jacaranda mimosiflora, Tabebuia spp, Brahea edulis, Butia capitata, Phoenix canariensis, Syagrus romanzoffianam, Washingtonia filifera, and Washingtonia robusta.

**Multi-Trunk:** Any tree with multiple trunks attributed to a single plant. The diameter of each trunk shall be measured at its widest point, when measured at a point four and one-half feet (4.5’
feet above natural grade, and the combined trunk diameters shall be used to determine the tree’s size for the purposes of this section.

**Oak Tree:** A tree that is at least fifteen feet (15’) in height, and whose trunk diameter is at least four inches (4”) at its widest point, when measured at a point four and one-half feet (4.5’) above natural grade, and is of the genus *Quercus*, including, but not limited to, *Quercus agrifolia* (coast live oak), *Quercus dumosa* (coastal scrub oak), *Quercus engelmannii* (engelmann oak), *Quercus berberidifolia* (scrub oak), *Quercus lobata* (valley oak), and *Quercus virginiana* (southern live oak).

**APPROVED TREE REMOVAL FOLLOW-UP NOTIFICATION REQUIREMENTS**

Following approval of a tree removal permit, and at least fifteen (15) days before the tree is scheduled for removal, the permittee shall provide written notice by personal delivery of the tree’s location, removal reason(s), as well as the date and time of the scheduled tree removal to the owners and occupants of all properties within a 100-foot radius of the site on which the subject tree is located.

Immediately following approval of tree removal permit, the permittee shall also post on the subject tree an 8.5 inch by 11 inch size notice, in a form and manner approved by the Planning and Building Director, for not fewer than fifteen (15) consecutive days. If the subject tree is not readily visible from the public right-of-way, notice shall instead be posted on the parcel on which the tree is located, in a location that is visible from, and within ten (10) feet of, the public right-of-way.

The permittee shall submit proof of the required noticing to the Planning and Building Director. No work is to begin until City staff has verified that notice was provided and posted as required.

The posted notice shall be removed upon completion of the tree removal work, or fifteen (15) days after the end of the ten (10) day posting period, whichever comes first.

*All work must be performed by a state licensed contractor with a current City business license - Business/Vehicle License-stickers are required to be on all vehicles at project site - Sticker must be visible for inspection by a Code Enforcement Officer - Sticker is not a parking permit*

**Permit Expiration and Inspection:** All work for which a tree removal permit is issued shall be completed within ninety (90) days from the date the permit is issued, unless the City grants one written extension for a period not to exceed thirty (30) days. The permittee shall, within seven (7) business days of the completion of the work, contact the Building and Planning Director and schedule a compliance inspection.
# TREE REPLACEMENT MATRIX

<table>
<thead>
<tr>
<th>Trunk of Removed Tree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diameter at Breast Height</td>
</tr>
<tr>
<td>4-8 inches</td>
</tr>
<tr>
<td>9-12 inches</td>
</tr>
<tr>
<td>13-18 inches</td>
</tr>
<tr>
<td>19-36 inches</td>
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<tr>
<td>37&quot; or greater</td>
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</tbody>
</table>

- Protected Heritage and Oak trees must be replaced with Heritage and Oak trees on the list of protected heritage trees
- Protected specimen trees must be replaced with specimen or heritage trees on the list of protected heritage and specimen trees
- Generally fruit and palm trees are not accepted tree replacements for any approved removals

The replacement tree(s) must be planted in accordance with all ISA Standards and Best Management Practices.
TREE PRUNING/GARDENER FACT SHEET

How Much Should Be Pruned? The amount of live tissue that should be removed depends on the tree's size, species, and age, as well as the pruning objectives. Younger trees tolerate the removal of a higher percentage of living tissue better than mature trees do. Generally, no more than 25% of the crown should be removed at once, and less for mature trees.

Pruning Techniques: Specific types of pruning may be necessary to maintain a mature tree in a healthy, safe and attractive condition.

ACCEPTABLE PRUNING PRACTICES:

- **Cleaning** is the removal of dead, dying, diseased, weakly attached, and low-vigor branches from the crown of a tree.
- **Thinning** is selective branch removal to improve structure, increase light penetration and improve air movement through the crown. Proper thinning opens the foliage of a tree, reduces weight on heavy limbs and helps retain the tree's natural shape.
- **Pollarding** is a method of pruning that keeps trees and shrubs smaller than they would naturally grow. Pollarding is normally started once a tree or shrub reaches a certain height, and annual pollarding will restrict the plant to that height.
- **Raising** removes the lower branches from a tree to provide clearance for buildings, vehicles, pedestrians and vistas.
- **Reduction** reduces the size of a tree, often for utility line clearance. Reducing a tree’s height or spread is best accomplished by pruning back the leaders and branch terminals to secondary branches that are large enough to assume the terminal roles (at least one-third the diameter of the cut stem). Compared to topping, reduction helps maintain the form and structural integrity of the tree.

UNACCEPTABLE PRUNING PRACTICES:

- **Topping** is the practice of removing whole tops of trees or large branches and/or trunks from the tops of trees, leaving stubs or lateral branches that are too small to assume the role of a terminal leader. Other common names for the practice include hat-racking, heading, rounding over, and tipping.
- **Lions Tailing** is the over-pruning of a tree by removing the majority of the interior branches leaving only the terminal leaves

TREE MAINTENANCE REQUIREMENTS

- Any established tree(s) in need of maintenance or removal shall require a California State Licensed Contractor and who also possesses a valid/current City of San Marino business license.
• Contractors must be licensed by the state of California with a C-61/D-49 Tree Service Contractor or C-27 Landscaping Contractor.

• All work performed by the state licensed contractor shall adhere to all tree maintenance standards set forth in the most current I.S.A ANSI A300 Pruning Standards and Tree Maintenance Best Management Practices. (BMP's)

*A Tree Removal Permit is required for all established trees, dead or alive. See City Code 23.06.15(B) for the definition of an established tree. Arborist information may be found at http://www.treesaregood.org/findanarborist/findanarborist Contractor's California State License can be verified at https://www2.cslb.ca.gov/OnlineServices/CheckLicense/CheckLicense.aspx

GARDENER DO'S AND DON'TS

• All gardeners must first secure a City business license before providing service.

City of San Marino gardening license allows a gardener to provide general gardening services such as mowing lawn, edging, maintaining bushes, sweeping or using a City approved leaf blower. The City shall approve a portable leaf blower that has been certified by the manufacturer as producing a maximum sound of sixty five (65) decibels (dBA)

*A gardener is not licensed to provide tree maintenance or remove any established tree.

• Permitted Hours of Operation: Gas powered gardening equipment

<table>
<thead>
<tr>
<th>Monday through Saturday</th>
<th>8:00 A.M. to 9:00 P.M.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunday</td>
<td>9:00 A.M. to 8:00 P.M.</td>
</tr>
</tbody>
</table>

• Permitted Hours Of Use: No portable blower shall be used within the City except during the following hours:

<table>
<thead>
<tr>
<th>Monday through Friday</th>
<th>8:00 A.M. to 5:00 P.M.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saturday</td>
<td>9:00 A.M. to 4:00 P.M.</td>
</tr>
</tbody>
</table>
ADDRESS:

This checklist should be reviewed together with staff at the Planning and Building Counter and must be submitted with the application. Incomplete applications cannot be processed and will be returned to the applicant together with a checklist specifying the items that are incomplete.

*A COPY OF THE SIGNED/APPROVED PERMIT MUST BE POSTED AT THE SITE DURING THE WORK. FAILURE TO POST MAY RESULT IN A "STOP WORK NOTICE" BEING ISSUED.

☐ APPLICATION FORM (One copy)
   a) Cover Sheet with Applicant Signature.

☐ SUPPLEMENTAL APPLICATION (One copy)
   a) Findings for a Private Tree Removal.
   b) Tree Evaluation Report (optional, must be prepared by an arborist).

☐ SITE PLAN (One copy of site plan, a of 8.5" x 11", no larger than 11" x 17")
   a) North arrow and drawing scale. b) Project site address.
   c) Property lines.
   d) Existing structures with their uses labeled.
   e) Location of tree requested for removal. Show full tree canopy and setbacks from tree trunk to property line and structures. Number each tree if multiple trees are proposed for removal.
   f) Location of other trees and landscaped areas on property.
   g) Topography (when applicable, such as in hillside areas).

☐ OWNERSHIP VERIFICATION (One copy)
   a) Copy of grant deed, utility bill or other proof of ownership.
   b) Written consent from property owner to authorize another representative (if applicable).

☐ PHOTOS (One set)
   a) A minimum of four photos (varied angles) of the tree canopy including one from the public right-of-way. You may also include close-ups of any diseased branches or damaged structures.

☐ APPLICATION FEES ($245)

ADDITIONAL ITEMS:
In addition, the following items may be required by staff for submittal:

☐ LANDSCAPE PLAN (Two sets - should include species, size and location of replacement trees)

☐ CERTIFICATE OF APPROPRIATENESS (for Landmark Tree removals)

☐ OTHER ITEMS
PROJECT ADDRESS: 

ZONING DESIGNATION: 

REASON FOR REMOVAL: (provide a separate reason for each tree being removed on each corresponding form) 

ARBORIST EVALUATION REPORT:

In order to make findings, it is recommended that an I.S.A Certified Arborist or I.S.A Registered Consulting Arborist evaluate the tree to be removed and submit the evaluation report (see attached form).

APPLICANT/OWNER INFORMATION:

Name of Applicant: ____________________________

Address: ____________________________ City: _______________ State: ___________ Zip: ________

Phone Number: (day) __________________ Fax Number: __________________ E-mail: ____________

Name of Property Owner: (if different from applicant) ____________________________

Address: ____________________________

City: ____________________________ State: ___________ Zip: ________

Phone Number: (day) __________________ Fax Number: __________________ E-mail: ____________

TREE INFORMATION/TREE #1: (complete a separate “Additional Tree” form for each tree requested for removal)

Type of Protected Tree: ☐ Heritage ☐ Specimen ☐ Native ☐ Multi-trunk
☐ Other

Tree Species: ____________________________

Common Name: ____________________________

Tree diameter as measured 4.5 feet (DBH) above natural grade: __________ inches

Height: __________ feet, Spread: __________ feet, Number of trunks: __________

Location of Tree (i.e. front yard, rear yard, or east/west/south/north side yard): ____________________________

Distance of tree trunk to the nearest property line: ____________________________

CERTIFICATION: I hereby certify that I am the applicant or designated agent named herein and that I am familiar with the rules and regulations with respect to preparing and filing this petition for discretionary action, and that the statements and answers contained herein and the information attached are in all respects true and accurate to the best of my knowledge and belief.

Signature of Applicant or Agent: ____________________________

Date: ______________
FINDINGS FOR A PRIVATE TREE REMOVAL:

The Planning and Building Director, or his or her designee, may issue a tree removal permit, only if he or she determines that the following requirements have been met:

Findings:

a. The established tree or oak tree adversely impacts the growth of adjacent trees or constitutes a nuisance or a hazard to persons or property because of its condition, location, species, proximity to existing structures, closeness to walkways or interference with utilities; or

b. The removal of the proposed established tree is part of a re-landscaping plan that the planning and building director finds will provide a tree canopy that is sustainable over the long term.

Please provide information that justifies the approval of your request. Use additional sheets if more space is necessary to complete your response. See Section 23.06.15 of the Municipal Code – Preservation of Trees Ordinance for any additional Code requirements. Approval of the removal of landmark and landmark-eligible trees shall follow the procedures for the removal of landmarks in Chapter 23.18.010 of the Zoning Code.

Company/Contractor: ____________________________ CLSB License# __________
Business License ______________________________

* A COPY OF THIS SIGNED/APPROVED PERMIT MUST BE POSTED AT THE SITE DURING THE WORK-
FAILURE TO POST MAY RESULT IN A “STOP WORK NOTICE” BEING ISSUED.

FOR STAFF USE ONLY

Case No.: __________________ Total Fees Paid: $ __________ Date Received: __________ Inspector: __________

APPROVED-DATE __________ DENIED-DATE __________

* EXPIRATION DATE OF PERMIT __________

* SPECIAL CONDITIONS __________

BELOW IS THE CONDITIONAL REQUIREMENT(S) OF PERMIT ISSUED:

☐ PLANT __________ "BOX MINIMUM SIZE TREE(S) ☐ PLANT __________ "BOX MINIMUM SIZE TREE(S)

☐ SPECIFIC TREE REQUIRED __________________________ ☐ SPECIFIC TREE REQUIRED __________________________

☐ PLANT ____ 15 GALLON MINIMUM SIZE TREE(S) ☐ SPECIFIC TREE REQUIRED __________________________

☐ PLANT ____ 15 GALLON MINIMUM SIZE SHRUB(S) ☐ SPECIFIC TREE REQUIRED __________________________

AUTHORIZE SIGNATURE FOR CONDITION(S) OF REMOVAL DATE __________________________

________________________________________________________

Rev: 5/20/19
ARBORIST EVALUATION REPORT:

The following section is optional and not required as part of the submittal. However, in order to make findings for a tree removal, it is recommended that an arborist evaluation report be submitted. The arborist should complete one form per tree proposed for removal and attach a copy of their certification. Use additional sheets if more space is necessary to complete the responses. The arborist is not required to use this form, provided all of the information requested below is addressed.

ASCA/ISA Certified Arborist Name: ________________________________

Certified Arborist Number: ___________________________ Inspection Date: ___________________________

TREE CHARACTERISTICS:

Species: ____________________

<table>
<thead>
<tr>
<th>Genus</th>
<th>Species</th>
<th>Common Name</th>
</tr>
</thead>
</table>

Tree ID#: ______ DBH: ______ # of trunks: ______ Height: ______ Spread: ______

Form: □ generally symmetric □ major asymmetry □ stump sprout □ stag-headed

Age: □ young □ semi-mature □ mature □ over-mature/senescent

Pruning: □ lion-tailed □ crown raised □ topped □ multiple pruning events □ cabled/braced □ flush cuts □ pollarded □ excessively thinned □ none

Amount of Deadwood: □ 0-10% □ 11-20% □ 21-30% □ over 30%

Location & Extent of Decay: ________________________________

Known History of Failure: ________________________________

Pests or Diseases: ________________________________

Other Inspections: □ Decay Test □ Canopy Inspection □ Root Crown Excavation (limited)

Tree Condition Summary:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Rev. 5/20/19
SITE CONDITIONS:

Landscape Type: □ lawn □ shrub area □ natural hillside □ parkway □ courtyard
□ other ____________________

Surroundings: □ Tree overhangs/extends to adjacent property □ Tree is causing damage to structures
□ other ____________________

Irrigation conditions: □ none □ adequate □ inadequate □ excessive □ trunk wetted
Irrigation type: □ spray □ drip □ automatic □ manual □ other

Site Disturbance: □ none □ soil □ grade change □ construction □ chemical
% dripline paved _______ % dripline w/ fill soil _______% dripline with grade lowered _______

Soil Problems: □ none □ drainage □ shallow □ compacted □ saline
□ alkaline □ acidic □ clay □ expansive

Slope: □ none □ hillside under 20% □ hillside over 20% Slope aspect __________________________

Site prone to wind: □ yes □ no Prevailing wind direction: __________________________

Site Condition Summary:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

OVERALL SUMMARY AND RECOMMENDATION:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

□ Additional analysis attached □ Photographs attached

CERTIFICATION: I hereby certify that I am a certified arborist and that I am familiar with the subject property and
the trees being requested for removal, and that the statements and answers contained herein and the information attached
are in all respects true and accurate to the best of my knowledge and belief.

Signature of Arborist __________________________ Date __________________________
SAN MARINO PLANNING AND BUILDING DEPARTMENT
http://www.ci.san-marino.ca.us
ADDITIONAL TREE- #

TREE INFORMATION: (complete a separate request for each tree being removed)
Type of Protected Tree: ☐ Heritage ☐ Specimen ☐ Native ☐ Multi-trunk ☐ Other
Tree Species:
Common Name:
Tree diameter as measured 4.5 feet (DBH) above natural grade: ___________ inches
Height: ___________ feet, Spread: ___________ feet, Number of trunks:
Location of Tree (i.e. front yard, rear yard, or east/west/south/north side yard):
Distance of tree trunk to the nearest property line.

OVERALL SUMMARY AND RECOMMENDATION:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

 ☐ Additional analysis attached ☐ Photographs attached

CERTIFICATION: I hereby certify that I am a certified arborist and that I am familiar with the subject property and the trees being requested for removal, and that the statements and answers contained herein and the information attached are in all respects true and accurate to the best of my knowledge and belief.

______________________________  __________________________
Signature of Arborist              Date

SITE CONDITIONS:
Landscape Type: ☐ lawn ☐ shrub area ☐ natural hillside ☐ parkway ☐ courtyard
☐ other _______________________
Surroundings: ☐ Tree overhangs/extends to adjacent property ☐ Tree is causing damage to structures
☐ other _______________________
Irrigation conditions: ☐ none ☐ adequate ☐ inadequate ☐ excessive ☐ trunk wetted
Irrigation type: ☐ spray ☐ drip ☐ automatic ☐ manual ☐ other
Site Disturbance: ☐ none ☐ soil ☐ grade change ☐ construction ☐ chemical
% dripline paved  ____  % dripline w/ fill soil  ____  % dripline with grade lowered  ____

Soil Problems:  □ none  □ drainage  □ shallow  □ compacted  □ saline  
  □ alkaline  □ acidic  □ clay  □ expansive

Slope:  □ none  □ hillside under 20%  □ hillside over 20%  □ slope aspect  __________________________
Site prone to wind:  □ yes □ no  □ prevailing wind direction:  __________________________
Site Condition Summary:  __________________________

______________________________

ARBORIST EVALUATION REPORT:

The following section is optional and not required as part of the submittal. However, in order to make findings for a tree removal, it is recommended that an arborist evaluation report be submitted. The arborist should complete one form per tree proposed for removal and attach a copy of their certification. Use additional sheets if more space is necessary to complete the responses. The arborist is not required to use this form, provided all of the information requested below is addressed.

ASCA/ISA Certified Arborist Name:

Certified Arborist Number:  __________________________  Inspection Date:  __________________________

TREE CHARACTERISTICS:

Species:  __________________________  Genus:  __________________________  Species:  __________________________  Common Name:  __________________________

Tree ID#:  ______  DBH:  ______  # of trunks:  ______  Height:  ______  Spread:  ______

Form:  □ generally symmetric  □ major asymmetry  □ stump sprout  □ stag-headed
Age:  □ young  □ semi-mature  □ mature  □ over-mature/senescent
Pruning:  □ lion-tailed  □ crown raised  □ topped  □ multiple pruning events  □ cabled/braced  
  □ flush cuts  □ pollarded  □ excessively thinned  □ none
Amount of Deadwood:  □ 0-10%  □ 11-20%  □ 21-30%  □ over 30%

Location & Extent of Decay:  __________________________

Known History of Failure:  __________________________

Pests or Diseases:  __________________________
ADDITIONAL TREE - #

Other Inspections:  □ Decay Test   □ Canopy Inspection   □ Root Crown Excavation (limited)

Tree Condition Summary:
NOTICE AFFIDAVIT FOR A TREE REMOVAL PERMIT

I, ___________________________ hereby certify that on _____________ I installed a Notice of a tree removal at the property known as ___________________ for which a tree(s) removal application is being considered by the City of San Marino.

By signing this, I certify to posting the sign on the tree(s) scheduled for removal as part of the Tree Removal Permit No. ____________.

I hereby declare that I have read and understand the requirements of City Code 23.06.15D6.

I hereby submit a photo of the sign as it was installed on the subject tree(s) and will submit additional certifications and photos if directed by City staff.

Furthermore, failure to adequately post and maintain the required sign on the property, fifteen (15) days prior to the scheduled removal will result in an automatic delay of the application.

SIGNATURE: ___________________________ Date: ________________

Please complete this affidavit and mail or deliver to:

City of San Marino, Planning and Building Department
2200 Huntington Drive, San Marino, CA. 91108

FOR OFFICE USE ONLY

CHECKED BY: ___________________ DATE: ________________

POSTED DATE: ________________ PHOTOS ATTACHED: ____________
NOTICE OF TREE REMOVAL

TREE PERMIT #_________

Property Address________________________
Estimated Removal Date __________________
Company Name___________________________
Contractor’s State License #______________
Contractor Contact #____________________
City Business License #___________________
Date of Initial Posting____________________