

ARB TREE REMOVAL REQUEST

Date: _____

Owner _____

Contractor _____

Lot # _____

Address _____

Address _____

Phone No _____

Phone No _____

E-mail _____

E-mail _____

Tree Removal - List each tree, its location and the reason for the removal request. A letter from an arborist explaining why the tree must be removed is required for any **specimen** tree (i.e. live oak) removal. No arborist letter is required for non-specimen trees. No approval is required for any tree less than 4" in diameter at 4' above the ground.

**TREES TO BE REMOVED MUST BE MARKED WITH RIBBON OR TAPE.
APPROVAL MUST BE GIVEN PRIOR TO ANY TREE REMOVAL BEGINNING.**

Submitted by: _____

Owner OR Contractor
(Circle one)

Submit by mail to:

Submit by email to:

Crosswinds ARB

phil@imchhi.com

IMC Resort Services, Inc.

Attn: Phil Heislman

2 Corpus Christi, Ste 302

Hilton Head Island, SC 29928

For Office Use Only. Do Not Write Below This Line

_____ **Approved as submitted**

_____ **Approved with corrections as noted below**

_____ **Declined for reasons noted below**