



**Application for Tree Cutting Permit**  
 Erosion District and Tree Cutting Bylaw  
 (Amended by Bylaw No. 1268 and Bylaw No. 1379)

Owner(s)					
Mailing Address				City	Postal Code
Telephone		Fax		Email	
Lot	Section	Range	District	Plan	PID

**Property Information**

Company Name		Contact			
Address		City		Postal Code	
Telephone		Fax		Email	

**Applicant Information**

Hereby make application under Section 978 of the Municipal Act for a Tree Cutting Permit to cut and remove the following tree(s) on the Land in the location(s) shown on the attached sketch plan for the following reasons:

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I further agree, if required by the Municipal Engineer, to enter into and register a Restrictive Covenant and Indemnity under Section 215 of the *Land Title Act* relieving the District of Central Saanich from any liability or claims for damages which may result from the issuance of the permit and the work which may be authorized by it. {Bylaw No. 1268}

***The undersigned makes application as specified herein, and declares that the information submitted in support of the application is true and correct in all respects, complying with the bylaws and regulations of the Corporation of the District of Central Saanich.***

***I, the owner of the above property, hereby authorize and appoint the applicant above as my agent to apply for and obtain this permit.***

\_\_\_\_\_  
Signature of OWNER

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



**THE CORPORATION OF THE DISTRICT OF CENTRAL SAANICH**  
1903 Mt. Newton Cross Road Saanichton BC V8M 2A9 phone (250) 544-4210 fax (250) 652-4737  
www.centralsaanich.ca

**FOR OFFICE USE ONLY**

	Yes	No
<b>Building Permit Applied For</b>		
<b>Tree Protection Bylaw No. 1595 Applied For</b>		
<b>Expert Report Required</b>		
<b>Prohibited Area</b>		
<b>Security Required</b>		
<b>Applicable Regulations Section</b>		<b>Bylaw No.</b>
<b>Fee Paid \$100.00</b>	<b>Date Received</b>	