

APPLICATION FOR PERMIT TO TRIM TREES

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

COMPANY PHONE #: _____

The holder of this permit shall provide proof of insurance in the following amounts:

Liability Insurance for Property Damage: \$50,000

Liability Insurance for Bodily Injury: \$50,000

Aggregate Insurance: \$100,000

NAME OF INSURANCE COMPANY: _____

ADDRESS OF INSURANCE COMPANY: _____

I agree to abide by the Hazen Ordinance, Chapter XXII relating to forestry services within the City of Hazen, North Dakota and acknowledge receipt of such ordinance this _____ day of _____, 20 _____.

Signed: _____

Title: _____

PERMIT TO TRIM TREES WITHIN THE CITY OF HAZEN, NORTH DAKOTA

This permit shall be in effect from January 1, 20_____ to December 31, 20_____.

Signed: _____

Auditor, City of Hazen

\$100.00 Permit Fee

Date Rec'd: _____

Receipt #: _____