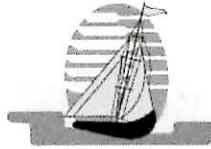


# City of St. Clair Shores

27600 Jefferson Circle Drive St. Clair Shores, MI 48081-2093

Phone: (586) 445-5363 Fax: 586-445-4052 [www.scsmi.net](http://www.scsmi.net)

**Mayor**  
Kip C. Walby  
**Mayor Pro-Tem**  
John D. Caron  
**City Manager**  
Michael E. Smith



**Council Members:**  
Peter A. Accica  
Ronald J. Frederick  
Peter A. Rubino  
Candice B. Rusie  
Chris M. Vitale

Dear Resident:

## Tree removal application

Part of the tree removal application that you have submitted involves evaluation of possible sewer lead conflict (roots in the pipe connecting your house to the city main).

The Sewer Division portion of the application is only one of four criteria used to determine eligibility for approval **and by itself is not sufficient for the city to remove the tree**. If the criteria is met for the Sewer Division and the adjacent property (property next to tree location in right of way) owner request then the property owner will be able to receive permission to remove the tree at his or her own expense.

To qualify for the Sewer Department portion of the application please provide documentation that you are having your sewer lead cleaned **three or more times in the twelve month prior to the application date**.

If this applies in your case, please forward copies of your sewer cleaning receipts to my attention for credit towards the tree removal. Sewer cleaning receipts must be dated and verifiable to receive credit towards the tree removal. You will be contacted if further information is needed. If this does not apply it is important that you call the forestry division and let them know so that they can finish processing your application.

Please also direct any general application questions to the forestry supervisor at 586-445-5363.

**FORESTRY POLICY (Enforcement Authority, City Code 20.253 sec. 67B.3)**

**PUBLIC RIGHT-OF-WAY TREE REMOVAL GUIDELINES**

**INTENTION:** The St. Clair Shores Department of Public Works is charged with enforcement of this ordinance article, and to that end, the Director and any authorized city employee or agent may inspect trees in the public right of way, it is necessary to address the potential conflict of protecting the valuable benefits of trees to the community in perspective to the potential hazard and or detrimental effects to property by establishing an evaluative process to determine proper and constructive response regarding tree removal request.

**PROCEDURES:** Application/Evaluations for tree removal

**I. REMOVAL OF HAZARDOUS OR UNHEALTHY TREES IN CITY RIGHT OF WAY:**

If a tree is found, by DPW Forestry Division Representative or authorized and qualified representative, to present a physical hazard or determined to be unhealthy (diseased, infested, etc.), the tree may be removed under the direction of the City Forestry Representative. A tree removal application form shall be required.

**II. REMOVAL OF TREES IN CITY RIGHT OF WAY DUE TO ENVIRONMENTAL CONCERNS:**

An application for tree removal will be evaluated by DPW Forestry Division Representative or qualified representative and may be reapplied for annually by an adjacent property owner/resident or city representative.

***CRITERIA FOR EVALUATION AND REVIEW RESPONSIBILITY***

- A. UNDESIRABLE TREE:** Review responsibility shall be with the representative who shall consider tree type, size, and physical characteristics of tree.
- B. ADJACENT PROPERTY OWNER REQUEST:** Property owner may submit a signed request for tree removal.
- C. SEWER PIPE CONFLICT:** Representative shall determine if the tree will have a major negative impact on sanitary sewer service.

**NOTE:** The resident, if the applicant, must participate in evaluative process which may include the application of alternative methods i.e. chemical treatment, clean out installation, pipe lining, etc. which shall be applied at the request of the city representative prior to consideration of tree removal. Major negative impact shall be defined as having documented proof of more than three sewer cleanings (indicating root problems) in the previous twelve months.

- D. INFRASTRUCTURE IMPACT:** Review responsibility shall be with the St. Clair Shores Community Development representative.

**III. APPLICATION**

The application for tree removal shall be in writing. Applications shall show applicant name, address, date, phone number, and specific location of tree. The application shall also detail the tree type, size, and condition. The form will be divided into two primary sections.

1. Removal of hazardous or unhealthy tree.
2. Removal of tree due to environmental concerns.

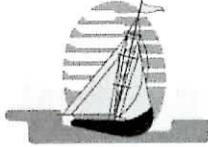
Each application shall be scored using the St. Clair Shores Tree Removal Application Form (attached hereto).

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Dear Resident:

Recently you requested to have your tree in the right of way removed. Enclosed is a packet that includes our Forestry Policy, tree removal application and a letter from the Sewer Division.

Please review the entire packet. If you feel that you qualify for a tree removal, please fill out the enclosed application and return to us at:

Department of Public Works  
Forestry Division - Tree Removal  
19700 Pleasant  
St. Clair Shores, MI 48080

If you have any questions please call us at 586-445-5363.

Thank you.

ST. CLAIR SHORES DEPARTMENT OF PUBLIC WORKS  
19700 PLEASANT  
ST. CLAIR SHORES, MI 48080  
586-445-5363 FAX: 586-445-4052

TREE REMOVAL APPLICATION

Date \_\_\_\_\_

Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Address (if different from location of tree) \_\_\_\_\_

**(BELOW) CITY USE ONLY (BELOW)**

City Use: Type of tree _____	Diameter: _____
Condition: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Dangerous	
Remarks: _____	
Evaluated by: _____	Date _____ Value if determined _____

1. The City Representative has determined the tree to be hazardous, unhealthy, diseased or infested. If yes, City Representative, may order immediate removal.

\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ N/A      Initialed \_\_\_\_\_ Date \_\_\_\_\_

Comment: \_\_\_\_\_

2. Adjacent Property Owner Request

\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ N/A      Initialed \_\_\_\_\_ Date \_\_\_\_\_

Comment: \_\_\_\_\_

3. Sewer Lead Conflict

\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ N/A      Initialed \_\_\_\_\_ Date \_\_\_\_\_

Comment: \_\_\_\_\_

4. Infrastructure Impact

\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ N/A      Initialed \_\_\_\_\_ Date \_\_\_\_\_

Comment: \_\_\_\_\_