



Department of
CITY PLANNING

Office of Buildings – Arborist Division
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Atlanta, Georgia 30303
Tel: 404.330.6874
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TREE IMPACT STATEMENT

***CURRENT PHOTOS ARE REQUIRED:** At minimum, two (2) photographs should be taken from two different viewpoints. The photographs should show at least 50 feet beyond the proposed limit of disturbance.

***FORM IS VOID IF INCOMPLETE OR MISSING PHOTOGRAPHS**

Date:			
Permit Address:			<input type="checkbox"/> NE <input type="checkbox"/> NW <input type="checkbox"/> SE <input type="checkbox"/> SW
Permit Number:			

I, _____, certify that NO trees (including, but not limited to; the trunk, canopy, structural root plate or critical root zone) will be impacted in any way during the construction process at the location referenced in the above building permit. I further understand the terms, Critical Root Zone, Root Save Area, and Impacted as defined in the Atlanta Tree Ordinance (Atlanta Code of Ordinances, §158-26 through §158-110).

I understand providing false, incomplete and/or incorrect information on this form is a violation of the Atlanta Tree Protection Ordinances and is subject to fines, penalties and payments set forth therein.

Print Name

Signature

Date

Relationship to property: Property Owner Architect Contractor Engineer Landscape Architect Surveyor

If other, please contact the Arborist Division to determine eligibility for signature.

NOTE: Authorized Agents may not sign Tree Impact Statements.