



11995 Haney Place, Maple Ridge, BC V2X 6A9
Phone: 604-467-7349 Email: Trees@MapleRidge.ca

Maple Ridge Tree Protection and Management Bylaw No. 8045-2026

Property where trees are proposed to be removed.

Address: \_\_\_\_\_

Property in the Agriculture Land Reserve? [ ] Yes [ ] No

\*If no civic address, please provide Legal Description or PID No.

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Are you the property owner? [ ] Yes [ ] No

If No, include the owner's name/phone/email/address and signed Owner Consent form.

Owner Consent form attached: [ ] Yes [ ] No

Property Owner(s)' Name (If Different): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

A Tree Management Plan must accompany this application if proposing to remove more than 10 trees, or when clearing more than 500 square metres of land.

Total of trees proposed for removal: \_\_\_\_\_

Trees proposed for removal (Trees must be Tagged Onsite)

Table with 6 columns: Tree No., Tree Type /Species, Diameter at 1.40m height (DBH) (cm), Approximate Height, Reasons for Removal: (See below), Location (s). Rows for Tree No. 1, 2, 3.

**Reasons for Tree removal. Select and attach supporting information if applicable:**

A – an Arborist with a valid Tree Risk Assessment Qualification (TRAQ) determines the tree is a Hazard Tree;

Tree Risk Assessment attached:  Yes  No

C – the base of a Protected Tree is within 1.0 metre of a foundation wall of an existing principal dwelling;

Photos showing the measurement attached:  Yes  No

D – the tree is causing substantial structural or infrastructure damage, verified by the City or by a qualified Professional Engineer acceptable to the City;

Photos showing the damage attached:  Yes  No

Professional report attached:  Yes  No

G – the tree is on a Lot zoned for agricultural use with active farm status or a Farm Plan showing the tree would interfere with the best agricultural use of the land;

Farm Status:  Yes  No

Tree Management plan attached:  Yes  No

Farm Plan attached:  Yes  No

H – the tree is significantly diseased, damaged, or dying where it is likely to be dead within 6 months as documented in an Arborist Report.

**Supporting documents that may be required**

All tree cutting permit applications

It may be included as an attachment to the email submission or the paper application package.

At least 3 photos of the tree(s) in question, including whole tree(s), close-ups, and surrounding location/context attached:  Yes  No

Site location plan, including either:

Aerial photo of the property with tree(s) locations circled, or

This may be obtained using the [Ridge View 3.1 Map](#) under the Legend Images (Multiple Years) layer; please capture a screenshot of the property, circle each tree, and clearly label each corresponding tree number.

Dimensioned site sketch showing approximate tree locations

## Additional requirements

Strata tree:

Strata Consent Form attached:  Yes  No

Shared tree:

Neighbour Consent Form attached:  Yes  No

By signing below, I hereby declare that the above information is correct and true, and that I will abide by all the applicable provisions of the [Maple Ridge Tree Protection and Management bylaw](#) and conditions of the Tree Removal Permit issued pursuant to this application.

In consideration of the issuance of a tree cutting permit as a result of this application (the “permit”), the applicant agrees to indemnify and save harmless the City, its elected and appointed officials, officers, employees, servants and agents from and against all claims, losses, damages, costs, expenses, including investigatory and legal expenses and other actions caused by or attributable to any wilful or negligent act, omission, delay, or allegations thereof on the part of the applicant or owner and their employees, subcontractors or agents, related in any way to the permit. The applicant also agrees that this provision shall survive the termination of the permit.

Applicant Name: \_\_\_\_\_

Owner  Agent Contact

Signature

Date

*Personal information entered on this form is collected under the authority of section 26(c) of the Freedom of Information and Protection of Privacy Act (FIPPA) for the purposes of processing your Tree Removal Permit Application. Permit information may be made available to the public under the authority of section 22(4)(i) of FIPPA. If you have any questions or concerns about how your information will be used, contact the Legislative Services Department by calling 604-466-4300 ext. 5557 or by emailing [FOI@MapleRidge.ca](mailto:FOI@MapleRidge.ca). For more information about FIPPA at the city, please visit our [Freedom of Information](#) page.*