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Trees must be replaced

w/1" for 1" requirement

Tree 1 = 21

Tree 2 = 23

Total = 44 inches

44" - 1/2 tree = 29

24 trees AT \$25600 eA

= *7424.00

This amount must be paid prior

to the removal of the trees

A Check made out to

the Enrichmond foundation

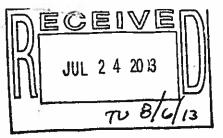
In memo Adopt A Tree fund.



CITY OF RICHMOND

Department of Public Works
Urban Forestry Division

800 Forest Lawn Dr. Richmond, VA 23227
Revised 08/18/11



Application for a Variance to the Municipal Tree Policy

After filling in this application, please submit for processing to the above address or the City of Richmond's arborist for the area the impacted tree(s) are in.

Applicant:	Date: July 22-2013
Name MARIECHART	
Street Address 3007 KELRAE DRIVE City Lic HMOND State VA. Zip 23234	Phone Number: 804-232-6108
City L'CHMONS State VA. Zip 23234	Email:
I, the undersigned, do hereby appeal to the Director of the Department of Public Works for a variance to the Municipal Tree Policy, Section: Letter: Number:	
as follows: (attach additional sheets, as needed) Dhere been here for farty same ye	en these trees here.
been a problem to me. I am new 76 years all: nawa	
Jam the one that I have there leaves, I we there	
trees gone, The That are all over my yord, my husball have a lead back he can and will that rafe.	
I have clever trees in my heart year that is a	
lot of leave. as they face I red	ed.
This variance is requested for the tree(s) or plant sites located at:	
Street Address 3007 KELRAE DRIVE and would have an affect upon the following tree(s) and/or plant site(s): Duranted life, to have more flavors	
in my youl lest, there are resto in the ground from the	
ties V	<i>v 0</i>
I believe the variance is justified due to the following: (attach additional sheets, as needed) There are roots-Stumps in my yord, I have noted	
There are noots- Stumps in my yord when 2 Tree	
In these steemps - nosts an	I sam afiled they
the cost, they beel live I repuil I mean live	
twenter years ago I was told the trees was mine	
He do Act hove Silower and the Trees are whom the side will	
Signature of Applicant: Marie C. Hart	
Director to circle decision:	
Variance Approved with Conditions Variance Denied	
have speken wil Mrs. Hart and she is ok wil stress remaining it	
we cut down the trees.	
Director's Signature: Date: Date: Date:	