



# Public Works, Forestry & Landscape Division

## Street Tree Service Request Form (951) 826-5311

**SERVICE REQUESTED:**

Tree Removal \_\_\_\_\_

Tree Trimming \_\_\_\_\_

Tree Planting \_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REQUESTOR INFORMATION:**

\_\_\_\_\_  
Name \_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Commercial Property** \_\_\_\_\_ **Owner** \_\_\_\_\_

**Residential Property** \_\_\_\_\_ **Renter** \_\_\_\_\_

(Requestor- Please sign on the Signature Line)

Please return this form with your payment to Public Works Department, Forestry & Landscape Division @ 8095 Lincoln Avenue, Riverside, CA. 92504 or Mail to the same address. Make checks payable to: City of Riverside. Once payment is received, the work will be scheduled & completed within 30 business days.

(This portion for City Use Only)

**Date:** \_\_\_\_\_

### DISPOSITION

**INSPECTOR'S RECOMMENDATION:**

**COST**

	Species	Quantity	DBH	
_____ Removal	_____	_____	_____	_____
_____ Trimming	_____	_____		_____
_____ Planting	_____	_____	Size	_____
_____ Line Clearance	_____	_____		_____
_____ Other	_____	_____		_____
	<b>TOTAL</b>			_____

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Submitted by:** \_\_\_\_\_

**WORK ORDER #** \_\_\_\_\_

**Approved by:** \_\_\_\_\_