

**SEWICKLEY BOROUGH
TREE EXPERT REGISTRATION
CLASS A LICENSE APPLICATION**

NOTE: CERTIFIED BOROUGH ARBORIST FOR TRIMMING TREES

1. APPLICATION DATE: _____

2. ANNUAL LICENSE FEE IS \$25.00, JANUARY 1 THROUGH DECEMBER 31.

AMOUNT PAID: \$ _____ DATE: _____

VIA: _____ *(No prorating of \$25.00 fee is permitted.)*

3. COPY OF CURRENT WORKERS' COMPENSATION INSURANCE CERTIFICATE LISTING SEWICKLEY BOROUGH AS CERTIFICATE HOLDER MUST BE ATTACHED HERETO.

VERIFIED: YES _____

4. COPY OF LIABILITY INSURANCE IN THE MINIMUM AMOUNT OF \$500,000 FOR BODILY INJURY AND DAMAGE TO PROPERTY, TO COVER AND SAVE HARMLESS THE BOROUGH AND ITS AGENTS FROM ALL SUITS AND CLAIMS, MUST BE ATTACHED HERETO.

VERIFIED: YES _____

NOT REQUIRED FOR TREE REMOVALS PERMITTED BY TREE COMMISSION

5. INTERNATIONAL SOCIETY OF ARBORICULTURE CERTIFIED ARBORIST EMPLOYED BY LICENSEE:

NAME: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____

INTERNATIONAL SOCIETY OF ARBORICULTURE CERTIFICATE NO.: _____

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- 6. LICENSEE, BY FILING THIS APPLICATION, HEREBY AGREES TO OPERATE UNDER CURRENT ANSI GUIDELINES.

- 7. LICENSEE, BY FILING THIS APPLICATION, AGREES TO PERFORM ALL WORK ACCORDING TO THE NATIONAL ARBORIST ASSOCIATION STANDARDS AND ACCEPTED ARBORICULTURAL PRACTICES.

I, _____ SIGNATURE

PRINTED NAME & TITLE
OF _____ BUSINESS NAME

BUSINESS ADDRESS

BUSINESS TELEPHONE

BUSINESS FAX

AM AUTHORIZED TO MAKE THIS APPLICATION ON BEHALF OF

Business Name AND IT IS AGREED THAT ALL EMPLOYEES

OR REPRESENTATIVES OF _____
Business Name

WILL ADHERE TO SEWICKLEY BOROUGH ORDINANCE NO. 1152 AND THE ABOVE STATED TERMS OF THIS LICENSE.

LICENSE ISSUE DATE: _____

LICENSE EXPIRATION DATE: DECEMBER 31, 2 _____

LICENSE ISSUED BY: _____
Borough Manager

****COPY OF THIS SIGNED APPLICATION SHALL CONSTITUTE THE LICENSE. UPON REQUEST BY BOROUGH OFFICIALS, LICENSE MUST BE PRODUCED BY LICENSEE TO PROVE THAT HE/SHE IS AN AUTHORIZED LICENSEE.**