

## Tree Trimmer License Application

### City of Loveland

500 E 3<sup>rd</sup> St., Ste. 230

Loveland, CO 80537

Ph. 970-962-2000 Option 9

Fax 970-962-2901



☐ New/Expired Application \$50      ☐ Renewal Application \$25

License is valid from the day you're approve to the end of the calendar year (December 31)

Registered Name:

DBA:

Owner's Name:

Phone Number:

<b>Business Address:</b>	<b>Email:</b>
<b>Mailing Address:</b>	<b>Driver's License No. &amp; State:</b>

#### Services Provided:


**Must list all types, classifications or kinds of services provided. (LMC 12.32.090)**

#### Evidence of Certifications / Qualifications - Check all that apply

- \_\_\_ ISA Certified Tree Worker Climber Specialist
- \_\_\_ ISA Certified Tree Worker Aerial Lift Specialist
- \_\_\_ Hold current license with City of Fort Collins, City of Greeley, Town of Berthoud, or the City of Longmont
- \_\_\_ Licensed company with the City of Loveland in 2022
- \_\_\_ Other certifications that may qualify

**Any checked line item must be accompanied by evidence for review.**

The following items must accompany your application:	
	Check or Money Order for <b>\$25/Renew</b> or <b>\$50/New or Expired License</b>
	Certificate of Insurance, including: <ul style="list-style-type: none"> <li>- All proposed operations of the applicant in the city</li> <li>- At least \$100,000.00 for injury/death of any one person</li> <li>- \$300,000.00 for injury/death of any number of persons in one accident</li> <li>- \$25,000.00 for damage to property</li> <li>- Policy may allow first \$100.00 for liability to be deductible</li> <li>- Must provide 30 days' notice to the City of Loveland prior to cancellation.</li> <li>- Have renewed COI emailed to: <a href="mailto:CLERK@cityofloveland.org">CLERK@cityofloveland.org</a></li> <li>- Failure to renew/provide proof of insurance will void your license</li> </ul>
	Photos of Both Sides of All Operating Vehicles/Units for Tree Trimming Business: <ul style="list-style-type: none"> <li>- All operating vehicles for business must have the name and address of the business on both sides and must be legible (lettering 3" high) <i>LMC 12-32-120</i></li> </ul>

### Oath of Applicant

I declare under penalty of perjury in the second degree that this application and all information contained herein are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the City of Loveland's Municipal Code.

NON-COMPLIANCE OF ANY OF THE SECTIONS OF THE CITY OF LOVELAND'S MUNICIPAL CODE WILL RESULT IN THE IMMEDIATE REVOCATION OF YOUR LICENSE.

<u>Applicant/Authorized Signature:</u>	<u>Print Name:</u>
<u>Title:</u>	<u>Date of Signature:</u>

### Office Use Only

Receive stamp:	Urban Forestry Reviewed on: _____
	Notes:
	Approved on: _____
	Notes: