

Buckhead of Tallahassee Homeowners Association, Inc.
Tree Removal Standards, Guidelines and Requirements
Request to Remove and Certification Form

This form is to document a request to remove a tree(s) from a Buckhead Lot and to document the health and general condition of said tree(s) prior to review by the Architectural Control Committee, (ACC). **The removal of trees is subject to prior approval of the ACC.** This information will be used by the ACC to support of its charge and duty to preserve trees and other natural features of Buckhead Lots and to minimize destruction of trees as set forth in the HOA Covenants.

Article III of the Buckhead HOA Covenants charges the ACC with the responsibility of minimizing the destruction of trees and existing ground cover when approving a request to construct on a lot. It is specifically required to preserve trees, existing ground cover and other natural features when possible.

Further, **Article XX** – entitled “**Tree Removal and Damage**” provides the following:

*“The owner [of a Lot] **shall at all times** protect against any direct or indirect damage to all vegetation, trees and land features located on the Lot and not specifically shown to be affected in the construction documents approved by the Architectural Control Committee. No trees shall be removed or damaged without the prior written approval of the Architectural Control Committee.”*

Any Lot Owner proposing to remove a tree(s) from a Lot at a time other than the original residential structure siting and construction must supply the following information and documentation for consideration by the ACC.

Name of Lot Owner: _____ Contact (email or phone) _____

Address _____ or Lot# _____ Block# _____

Please be sure to sign page 2 where indicated

Each of the foregoing conditions must be documented by a **Certified Arborist, Tree Surgeon, Certified Horticulturalist or other comparably qualified professional**, by marking all applicable conditions and signing below.

- Condition 1: _____ # and type of tree(s) is/are dead.
- Condition 2: _____ # and type of tree(s) is/are diseased and/or dying
- Condition 3: _____ # and type of tree(s) is/are healthy, i.e., health is not compromised
- Condition 4: _____ # and type of tree(s) present(s) a potential hazard to the residence if it/they were to fall.

Please indicate **the number, genus and size of trees** that fall into **Condition 3 or 4 above**, which have been inspected, and for which removal is being requested.

(Genus means Pine, Oak, Maple, etc. Attach additional paper/list if necessary.)

_____ Number & type of trees proposed for removal with diameter 10 inches or less

_____ Number & type of trees proposed for removal with diameter greater than 10 inches

_____ Date by which replanting will be completed, if applicable.

Only applicable if Conditions #3 or #4 are present

I have inspected the number and type of trees indicated and located at the address above. I certify that, in my professional opinion, the conditions and information above is true and correct to the best of my knowledge.

Printed Name of Inspection Professional

Signature of Inspection Professional

Title/Qualification/Credential

Name of Company, if applicable

Contact phone / email.

In the event both **Conditions #3 and #4** are present, the ACC’s approval of removal will be contingent upon the Lot Owner’s agreement to replace trees according to the following:

- Replant one 15 gallon tree of comparable type for every tree removed measuring 10 inches or less in diameter.
- Replant one 30 gallon tree of comparable type for every tree removed measuring greater than 10 inches in diameter.

Note: Comparable type does not require the same genus, but if evergreen originally, then evergreen replacement is required, etc.

Lot Owner Signature _____

****This signature acknowledges requirement to replant and agreement to same if Condition #3 and #4 are present.**

Buckhead HOA ACC Review/Process Date: _____

Buckhead HOA ACC Disposition: Approval / Disapproval / Deferred for Additional Information

Buckhead HOA ACC Member Name / Signature: _____