

City of Cannon Beach Tree Removal Application

Please fill out this form completely. Please type or print.

Applicant Name: Joseph Burch - Limbwalkers Tree Works LLC

Mailing Address: 39255 HWY 53 Nehalem OR 97131

Phone: 503-440-1174 Email: gajoe66@yahoo.com

Property Owner Name: WRIGHTS CAMPGROUND contact Arlene

Mailing Address: PO BOX 213 CANNON BEACH

Phone: 503-739-2472 Email: wrightsforcamping@gmail.com

Property Location: 334 RESERVOIR RD. Map/Tax Lot Number: _____

The city shall issue a tree removal permit if one of the following criteria is met. Please circle the letter of the criteria that applies.

These criteria require a Tree Removal Report from an International Society of Arboriculture (ISA) Certified Arborist:

- A. You are constructing a structure or development approved and allowed by pursuant to Cannon Beach Municipal Code 17.70.030, which involves any form of ground disturbance; including required vehicular and utility access. **SEE ATTACHMENT A – Removing Trees Because of Construction.**
- B. Removal of a tree for the health and vigor of surrounding trees.

These criteria require an ISA Tree Hazard Evaluation Form prepared by an ISA Certified Arborist:

- C. The tree presents a safety hazard, where:
 - 1. The condition or location of the tree presents either a foreseeable danger to public safety, or a foreseeable danger of property damage to an existing structure; and,
 - 2. Such hazard or danger cannot reasonably be alleviated by pruning or treatment of the tree.
- D. The tree was damaged by storm, fire or other injury, which cannot be saved by pruning.

You must submit a tree removal permit with a reason if:

- E. The tree is dead.
- F. Tree removal is necessary to provide solar access to a solar energy system where pruning will not provide adequate solar access:
 - 1. The city may require documentation that a device qualifies for Oregon Department of Energy Solar Tax Credit, or other incentive for installation of solar devices offered by a utility.
 - 2. No tree measuring more than 24 inches in diameter shall be removed for solar access.
- G. Tree removal is for landscaping purposes, subject to the following conditions:
 - 1. The tree cannot exceed 10 inches in diameter.
 - 2. A landscape plan for the affected area must be submitted and approved by the City.
 - 3. The landscape plan must incorporate replacement trees for the trees removed. The replacement trees must be at least six feet in height or have a two-inch caliper; and ,
 - 4. The City shall inspect the property one year after the approval of the permit to insure the landscape plan has been implemented.

If your tree presents an immediate danger of collapse and if such potential collapse represents a clear and present hazard to persons or property, please contact the Community Development Director (CDD). If it is determined by the CDD that there is an immediate danger, then a tree removal permit is not required prior to tree removal. However, within seven days after the tree removal, the tree owner shall make application for an after-the-fact permit. Where a tree presents an immediate danger of collapse, a complete ISA Tree Hazard Evaluation Form prepared by a certified arborist is not required. Where a safety hazard exists, as defined by this subsection, the city may require the tree's removal. If the tree has not been removed after forty-eight hours, the city may remove the tree and charge the costs to the owner.

.....
Application fee: \$50.00 for 1-4 trees; \$100 for 5 or more trees

Note: The application fee is a **nonrefundable** fee that is due upon receipt of application, whether the removal request is approved or denied.

Applicant Signature *[Signature]* Date: 12/5/22

If the applicant is other than the owner, the owner hereby grants permission for the applicant to act in their behalf.

Property Owner Signature: *Norma Gail Klugman* Date: 12/5/22
by Arden M. Slicks as POA

Please attach the name, address, phone number and signature of any additional property owners.

I understand, as property owner, that I am responsible if an approved tree removal permit is violated in any way. As property owner, my signature or an authorized applicant's signature, allows any duly authorized employee of the City to enter upon all properties affected by this permit, for the purpose of follow-up inspection, observation or measurement.

.....
Date: _____ Fee Paid: \$ _____ Receipt Number: _____ Permit #: _____

Application is:

_____ Approved _____ Denied

_____ Approved - Tree replacement required per Cannon Beach Municipal Code 17.70.040, Tree Replacement Policy.

_____ Approved with comments:

City of Cannon Beach
Finance Department

DEC 9 2022

PAID

By: _____ Date: _____

Decisions on the issuance of a tree removal permit may be appealed to the Planning Commission in accordance with Section 17.88.140 a, of the Municipal Code.

Attach a site plan showing the location and type of all trees on the property, including the trees to be removed. Indicate the location of replacement trees and the type. SEE ATTACHMENT B – Site Plan. Attach photos of the trees to be removed and mark the trees with ribbon.

Explain how the request meets one or more of the applicable criteria. Include the number and type of trees requested for removal. If appropriate, explain why pruning would not accomplish the same goal as tree removal.

↙ See reverse page

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By: Robert St. Clair
Planner Date: January 17, 2023

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A Photographic Guide to the Evaluation of Hazard Trees in Urban Areas
TREE HAZARD EVALUATION FORM 2nd Edition

Site/Address: WRIGHTS CAMPGROUND / SUNSET
 Map/Location: 234 RESERVOIR RD
 Owner: public _____ private unknown _____ other _____
 Date: 11-18-22 Arborist: BALDWIN ISA# DN0736
 Arborist's Signature: [Signature]

HAZARD RATING:						
_____	+	_____	+	_____	=	_____
Failure Potential		Size of part		Target Rating		Hazard Rating
_____ Immediate action needed						
_____ Needs further inspection						
_____ Dead tree						

TREE CHARACTERISTICS

Tree #: 1-8 (5 dead) Species: hemlock / spruce
 DBH: _____ # of trunks: _____ Height: _____ Spread: _____
 Form: generally symmetric minor asymmetry major asymmetry stump sprout stag-headed
 Crown Class: dominant co-dominant intermediate suppressed
 Live crown ratio: _____ % Age Class: young semi-mature mature over-mature/senescent
 Pruning History: crown cleaned excessively thinned topped crown raised pollarded crown reduced flush cuts cabled/braced
 none multiple pruning events Approx. dates: _____
 Special Value: specimen heritage/historic wildlife unusual street tree screen shade indigenous protected by gov. agency

TREE HEALTH

Foliage Cover: normal chronic necrotic Epicormics? Y N Growth obstructions:
 stakes wire/ties signs cables
 Foliage Density: normal sparse Leaf size: normal small
 curb/pavement guards
 Annual shoot growth: excellent average poor Twig Dieback? Y N
 other _____
 Woundwood development: excellent average poor none
 Vigor class: excellent average fair poor
 Major pests/diseases: _____

SITE CONDITIONS

Site Character: residence commercial industrial park open space natural woodland/forest
 Landscape type: parkway raised bed container mound lawn shrub border wind break
 Irrigation: none adequate inadequate excessive trunk wetted
 Recent site disturbance? Y N construction soil disturbance grade change line clearing site clearing
 % dripline paved: 0% 10-25% 25-50% 50-75% 75-100% Pavement lifted? Y N
 % dripline w/fill soil: 0% 10-25% 25-50% 50-75% 75-100%
 % dripline grade lowered: 0% 10-25% 25-50% 50-75% 75-100%
 Soil problems: drainage shallow compacted droughty saline alkaline acidic small volume disease center history of fail
 clay expansive slope _____? aspect: _____
 Obstructions: lights signage line-of-site view overhead lines underground utilities traffic adjacent veg. _____
 Exposure to wind: single tree below canopy above canopy recently exposed windward, canopy edge area prone to windthrow
 Prevailing wind direction: _____ Occurrence of snow/ice storms never seldom regularly

TARGET

Use Under Tree: building parking traffic pedestrian recreation landscape hardscape small features utility lines
 Can target be moved? Y N Can use be restricted? Y N
 Occupancy: occasional use intermittent use frequent use constant use

TREE DEFECTS

ROOT DEFECTS:

Suspect root rot: Y N Mushroom/conk/bracket present: Y N ID: _____
 Exposed roots: severe moderate low Undermined: severe moderate low
 Root pruned: _____ Root area affected: _____% Buttress wounded: Y N When: _____
 Restricted root area: severe moderate low Potential for root failure: severe moderate low
 LEAN: _____ deg. From vertical natural unnatural self-corrected Soil heaving: Y N
 Decay in plane of lean: Y N Roots broken: Y N Soil cracking: Y N
 Compounding factors: _____ Lean severity: severe moderate low
CROWN DEFECTS: Indicate presence of individual defects and rate their severity (s=severe, m=moderate, l=low)

DEFECT	ROOT CROWN	TRUNK	SCAFFOLDS	BRANCHES
Poor taper		H-18(7)		
Bow, sweep				
Codominants/forks	H-30(3)5 ✓			✓
Multiple attachments				
Included bark				
Excessive end weight				
Cracks/splits				
Hangers				
Girdling				
Wounds/seam				
Decay				
Cavity				
Conks/mushrooms/bracket				
Bleeding/sap flow	H-24(4)			✓
Loose/cracked bark				
Nesting hold/bee hive				
Deadwood/stubs				
Borers/termites/ants				
Cankers/galls/burrs				
Previous failure				

HAZARD RATING

Tree part most likely to fall: ENTIRE TREE
 Inspection period: _____ annual _____ biannual _____ other _____
 Failure Potential + Size of Part + Target Rating = Hazard Rating
3 + 3 + 4 = 10

Failure potential: 1-low; 2-medium; 3-high; 4-severe
 Size of part: 1 - <6" (15 cm); 2 - 6-18" (15-45 cm);
 3 - 18-30" (45-75 cm); 4 - > 30" (75 cm)
 Target rating: 1 - occasional use; 2 - intermittent use;
 3 - frequent use; 4 - constant use

HAZARD ABATEMENT

Prune: remove defective part reduce end weight crown clean thin raise canopy crown reduce restructure shape
 Cable/Brace: _____ Inspect further: root crown decay aerial monitor
 Remove tree: N Replace? Y Move Target: Y N Other: _____
 Effect on adjacent trees: none evaluate
 Notification: owner manager governing agency Date: 11-26-22

COMMENTS

TREES LOCATED WITHIN DENSE GROVE CAMPGROUND.
 SURVEY MARKED TREES WITH ORANGE PAINT THAT ARE RECOMMENDED
 FOR REMOVAL AS HAZARDOUS TO SEASONAL CAMPERS,

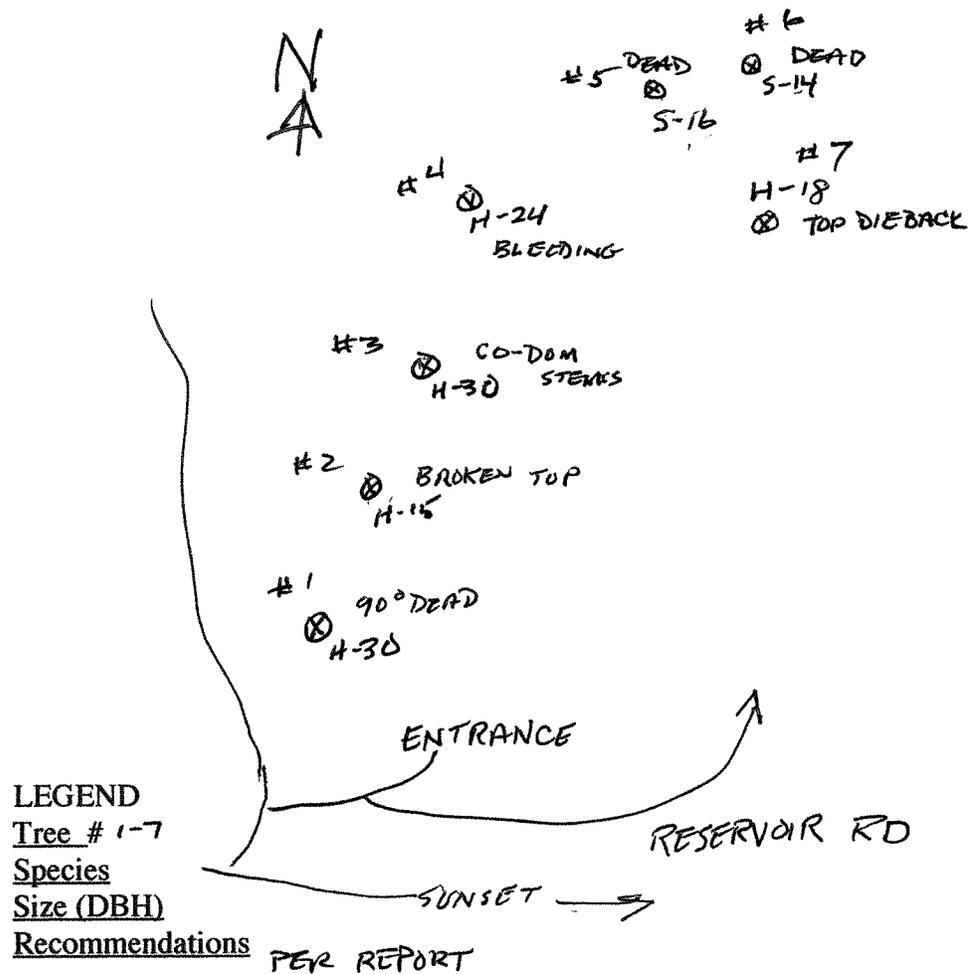
Balden Arboriculture Services
41500 Anderson Road
Nehalem, OR 97131
503-801-3762

TREE LOCATION SITE DIAGRAM

Client: WRIGHTS FOIR CAMPING
CANNON BEACH.

Date: 11-18-22

Project: TREE HAZARD EVALUATION



Sketch not to scale



Treescaples Northwest
Jeff Gerhardt, Consulting Arborist
ISA Certified Arborist #PN-5541A



City of Cannon Beach, Planning Department

Attn: Jeff Adams
adams@ci.cannon-beach.or.us
(503) 436-8054

January 16, 2023

Tree Removal Permit Application Review - 334 Reservoir Rd

Per your request, I reviewed the Tree Removal Permit Application submitted by Joseph Burch. I visually inspected the trees and site on January 15th. It is my recommendation the removal request for 8 trees be granted. Please additionally reference the site map and ISA Tree Hazard Evaluation prepared by Certified Arborist, Joe Balden.

- 5 of the trees are dead and I recommend they be approved for removal according to permit *Criteria E*. Three of these dead trees are Western hemlocks (*Tsuga heterophylla*), and 2 of the trees are Sitka spruce (*Picea sitchensis*).
- 3 additional hemlocks display significant stem weaknesses and pose a hazard. I recommend the removal request for these trees be granted based on *Criteria C*. "*The tree presents a safety hazard.*".

Replanting is not a requirement for this application, as sufficient trees exist on the property.

Best regards,

A handwritten signature in black ink, appearing to read "Jeff Gerhardt", on a light pink background.

Jeff Gerhardt

Treescaples Northwest
P.O. Box 52
Manzanita, OR 97130

CCB# 165360
Cell: 503-453-5571
www.treescaplesnorthwest.com

3 of the 8 hazardous trees recommended for removal at Wright's for Camping



Hazardous hemlock trees: broken top, declining canopy, and co-dominant stem

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