

**Township of Edison – Department of Planning and Engineering**

Edison Municipal Complex – 100 Municipal Boulevard, Edison, NJ 08817

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**TREE PERMIT (Removal/Replacement/Conservation)**

Date: \_\_\_\_\_ Permit Number: TRP \_\_\_\_\_ Fee Collected: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Applicant (Owner/Agent/Contractor): \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

Owner Phone: \_\_\_\_\_ Applicant Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

PERMIT FEES: Fee Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ \$200.00 for a single permit in conjunction with a Planning Board and/or Zoning Board of Adjustment board approval for either a minor site plan, minor subdivision, major site plan, major subdivision, and/or a single lot with variance. RESOLUTION # \_\_\_\_\_

\_\_\_\_\_ \$25.00 for a single permit on a single residential lot without a variance.

\_\_\_\_\_ \$25.00 for a single permit on a single lot with an Existing Dwelling.

\_\_\_\_\_ \$25.00 for a single permit on a single lot with Demolition Permit.

If this application is in conjunction with a Site Plan or Subdivision, or Variance submit:

- 1) A Copy of the Resolution approving development, 2) A Copy of Tree Conservation/Replacement Plan.

If this application is NOT in conjunction with a Site Plan or Subdivision, submit:

- 1) 3 copies of sealed plot plan with replacement schedule in accordance with Chapter 12.16.150A to include the location on the plan where trees are to be replaced. Tree removal for an existing home may submit a sketch.

\* Subject Permit Address: \_\_\_\_\_

Block(s): \_\_\_\_\_ Lot(s): \_\_\_\_\_

Area of Tract = \_\_\_\_\_ square feet, and \_\_\_\_\_ Acres

-Number of Trees On-site: \_\_\_\_\_ Number of Trees to be Removed: \_\_\_\_\_

Does applicant need to post *maintenance guarantee*? Yes \_\_\_\_\_ No \_\_\_\_\_

How many \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_

Does applicant propose to replace trees by way of *contribution fund*? Yes \_\_\_\_\_ No \_\_\_\_\_

How many \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_

***I certify that all information supplied is true and accurate:***

Owner / Applicant Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_