



BOISE CITY
TREE SERVICE
LICENSE APPLICATION

NON REFUNDABLE FEES:	
LICENSE	\$ 59.00
PROCESSING	\$ 1.50
TOTAL FEES DUE.....	\$ 60.50

OFFICE USE ONLY	
DATE _____	
CITY LICENSE # _____	
<input type="checkbox"/> INSURANCE CERTIFICATE (\$500,000.00)	
<input type="checkbox"/> INTERNATIONAL SOCIETY OF ARBORICULTURE (ISA) CERTIFICATE	
CERTIFICATE# _____	
EXP. DATE _____	
<input type="checkbox"/> BOISE CITY FORESTRY DIVISION (Approval Letter - New Applicants Only)	

••• LICENSE EXPIRES ANNUALLY ON DECEMBER 31st •••

All applicants must include a copy of: 1) **Certificate of Liability and Property Damage Insurance** in the minimum amount of **\$500,000.00**, 2) Current proof of arborist **Certification with International Society of Arboriculture**. New applicant must also include a copy of the **Boise City Forestry Division Approval Letter**.

BUSINESS NAME _____ BUSINESS PHONE _____

BUSINESS ADDRESS _____
 Street City Zip

MAILING ADDRESS _____
 If different than above Street City Zip

OWNER/MANAGER NAME _____
 First Middle Last

RESIDENCE ADDRESS _____
 Street City Zip

EMAIL ADDRESS _____ PHONE _____

- The City forester may require demonstration that all arboricultural work is done in accordance with ANSI A33 standards for Tree Care Operations.
- A "Permit for Tree Work" must be obtained from Community Forestry prior to performing any work on public trees or pruning/cutting private property elm trees.
- The City is authorized to suspend or revoke the tree care license of any person shown to violate any section of the Boise City Tree Ordinance (Boise City Code 9-16)

STATEMENT OF OATH

I swear and affirm, under penalty of perjury pursuant to Title 18, Chapter 54 Idaho Code, that the statements contained in the above application for a Tree Service License are true and correct to the best of my knowledge.

Date _____

 SIGNATURE OF APPLICANT

STATE OF IDAHO
 > ss
 COUNTY OF ADA

On this _____ day of _____ in the year _____, before me the undersigned, a Notary Public, personally appeared _____ known or identified to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he / she executed the same.

 NOTARY PUBLIC FOR IDAHO
 RESIDING AT _____, IDAHO
 MY COMMISSION EXPIRES _____