

**TOWN OF GRAY**

**Shoreland Zoning Tree Maintenance/Clearing Permit**

Name : \_\_\_\_\_.

Map: \_\_\_\_\_ Lot: \_\_\_\_\_ Phone # \_\_\_\_\_.

Location: \_\_\_\_\_.

Number of trees to be cut: \_\_\_\_\_.

Reason for cutting trees: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_.

Draw a sketch of where trees are located (include, property lines, structures, bodies of water, roads & septic systems)

Signature of  
applicant: \_\_\_\_\_ date \_\_\_\_\_

Signature of  
C.E.O.: \_\_\_\_\_ date \_\_\_\_\_

FEE: \$50.00