



Creativity Redefined!

Application For Arborist License

All applications, licenses and permits are subject to approval.
A copy of your certificate of insurance providing \$50,000 for bodily injury
and \$100,000 for property damage is required. Please attach and
submit with your completed application.

Name of Applicant *

Address *

Telephone Number *

Email Address

Name of Business *

Business Address *

Contact Name *

Telephone Number *

Name of Insurance Company *

**Date of Insurance
Expiration ***

Date *

I certify that the information provided is true,
accurate, and complete. I understand that the
completion of this application does not guarantee
approval.

For Office Use Only

Date of issue: _____

License: _____

Cost: _____

Effective Date: _____