TREE REMOVAL REQUEST FORM

Fill out form completely and submit with any required documentation:

Hand deliver: Palmira Golf & Country Club MHOA, c/o KEB Management Services, 11100 Bonita Beach Rd. # 101, Bonita Springs, FL 34135

Mail: Palmira Golf & Country Club MHOA, c/o KEB Management Services, 6017 Pine Ridge Rd., Naples, FL 34119

Email: <u>bloomk@kebmgnt.cc</u>	<u>om</u>			
Name of Resident Requesting Tree Removal:			Phone:	
Address:		-	Email:	
	Domovo. Do	Date Su ason for Re	ubmitted:	
Type of Tree You Wish to I	kemove: ke		:movai:	
Name of Company Perform	ning Work:			
danger to persons or proper I/We understand that approstanted. I/we acknowledge	rty (if applicable). oval of our request must be that this request is granted	granted b	architect indicating the tree is a before I/we can have the job ted and must be completed as ness days to approve this request	
Signature of Applicant	Signatu	ignature of Applicant		
Approved: Yes () No ()	Approved w/ Tree Replacement: Yes ()	No()	Approved/Disapproved By:	
			Date	