

**SCHEDULE E**

**APPLICATION FOR COMMITTEE EXEMPTION**

Name(s) of Owner: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Business: \_\_\_\_\_ Fax: \_\_\_\_\_

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

**Location of Trees Affected/Ownership**

Municipality: \_\_\_\_\_ Former Municipality \_\_\_\_\_

Assessment Roll:: \_\_\_\_\_ Lot: \_\_\_\_\_ Concession \_\_\_\_\_ 911 Address \_\_\_\_\_

The subject property is located on the \_\_\_\_\_ side of [Road Name] \_\_\_\_\_

Between \_\_\_\_\_ and \_\_\_\_\_

Is the property owned by the applicant? \_\_\_\_\_ YES \_\_\_\_\_ NO (if NO, authorizing letter must be attached)

If purchased within the last three years, state name and address of former owner and the date property was purchased.

\_\_\_\_\_

**Property/Forest Description**

This application is requesting a Permit to remove the following: (please indicate)

Total area: \_\_\_\_\_ Hectares: \_\_\_\_\_ Acres: \_\_\_\_\_

Total Woodland size on property: Hectares: \_\_\_\_\_ Acres: \_\_\_\_\_

Tree species to be destroyed on the described land:

\_\_\_\_\_

This Exemption is requested for the following reasons, including description of end use after trees have been destroyed:

\_\_\_\_\_

Owner's Signature

Date

\_\_\_\_\_

Is the applicant willing to offset the destruction of trees on the subject property through replanting trees on the said property? \_\_\_\_\_ YES \_\_\_\_\_ NO

**Please return this application with a cheque payable to the Treasurer - County of Oxford in the amount of \$200 to the Public Works Office, P. O. Box 397, Court House, Woodstock, ON N4S 7Y3**

Personal information on this form is collected under the authority of the *Municipal Act, 2001* for the purpose of conserving the County's forest stock and encouraging good forestry practices and optimal lumber harvest. Pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, questions about the collection of personal information should be directed to the County Clerk.

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