

TOWN OF TISBURY
DEPARTMENT OF PUBLIC WORKS
P.O. BOX 788, 115 HIGH POINT LANE
VINEYARD HAVEN, MA 02568
PHONE (508) 696-4220
FAX (508) 696-4221

REQUEST FOR SHADE TREE TRIMMING/REMOVAL

Date: _____

Name of Reporter: _____

Phone Number: _____

Location of Tree (Road Name, Nearest Intersection):

Nature of Problem:

Please do not write below this line.

The Tree Warden has determined the above mentioned tree:

___ Does not meet the definition under Massachusetts Law of a "Shade Tree".

___ Does meet the definition of a "Shade Tree". A Public Hearing will be scheduled

for the following date: _____

Comments:

Signature of Tree Warden

Date