



LAKE COUNTY
FLORIDA

To: _____ From: **Public Works/Road Ops**

Fax: _____ Pages: **1**

Phone: _____ Date: **1/7/2013**

E-Mail: _____

TREE REMOVAL REQUEST

Road Name: CR 42 Segment No.: 3-8990-33

Nearest City: DeLand

Address: _____

Section 38 Township: 17 Range: 29

Description of Tree: pine

Location of Tree: Approx 4,200 ft East of 10th St

Size of tree (s): 20"

Grind Stump? Yes Remove Stump? _____

If trim what class? Class 1 Class 2 Class 3

Power Lines or other hazards involved? Yes No

Sod? Yes No Type of sod Needed: _____

Comments: Tree is marked with flagging tape.

Questions concerning tree size(s) shall be addressed and agreed upon in writing by either the Project Manager or designee prior to the performance of the work. Any work performed without agreement by all parties shall be paid in accordance with the terms and conditions of the Contract. Invoices should be sent to the address listed below.

Approved by: _____ Date: _____

County Representative

Work Completed and OK to Pay: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Inspected by: _____	Date: _____
Invoice # _____	

Lake County Road Operations, Public Works 12901 County Landfill Road, Tavares.
Mailing Address, PO Box 7800, Tavares Florida 32778,
Phone Number: 352-343-6439 - Fax Number: 352-742-3888

Request Details Report

Request Number MA3-10333-R **Associated Work Order** MA3-16729-WO **Observed Date/Time** 1/6/13 5:30:P

Citizen Information

Name _____ **Phone** _____ **Ext.** _____
Address _____ **Alternate Phone** _____
_____ **Email Address** _____

Organization

Requestor Lake County Sheriff's Office
Contact _____

Issue and Location

Activity	Issue	Road Closure		
	Map Page	SEC	TWN	RNG
SGN Temporary Installation		38	17	29

Address Number

Route CR 42 (8990)

Intersect Route

Details

LCISO requested road closure between 10th St and Crows Bluff due to a fatal accident. Just after Steve got back home, he was called out to the same location because the S.O. was concerned that the tree that was hit (which is approximately 4,200 ft East of 10th) would fall. He took measurements and a photo to write up a contract tree removal request.

Notes

History

Resolution _____

Request Response Date 01/07/2013

Date _____
Time Arrived _____
Time Departed _____

[Click here to change page title](#)



#	Alt Key	Owner	Parcel Address	Owner Address	Tools
1	2687649	GALL TONY & CYNTHIA	45126 CROWS BLUFF RD DELAND FL 32720	45126 CROWS BLUFF RD DELAND, FL 32720	Zoom In

