

Native Land and Tree, Inc. 9422 Number Two Road Howey In The Hills, FL 34737 US (352) 266-7970 nativeland22@gmail.com www.Nativelandandtree.com

**BILL TO** Ms. Brenda Press Lake County Public Works Lake County Public Works / Road Operation **Road Operations Center** PO Box 7800 Tavares, FL 32778-7800

## RECEIVED

NOV 0 1 2016

LAKE COUNTY ROAD OPERATIONS

**INVOICE 1029** 

**DUE DATE 11/01/2016** 

ACTIVITY	QTY	RATE	AMOUNT
Tree Service Removal of large 60" DBH Oak tree and stump ground out from right of way located across from 18743 3rd Ave, Ferndale	1	3,600.00	3,600.00

PB 11-2-16 \$3,600.00 TOTAL DUE

2 川利山

OK TO PAY - FY 16/17

PO#: 20170147 Acct#: 1120.5053200. 830460 Goods Recd: 16 | 27 | 16

KK 11/1/16

91 11/3/16



To: Native Land and Tree	From: Pub	lic Works/F	Road Ops
Fax: 352-330-1600	Pages: 1		
Phone: 352-266-7970		Date:	11/2/2016
E-Mail: buffy@nativelandandt	tree.com		
TREE REMOVAL REQUEST			
Power Lines or other hazards invo	s located acre Range: 26 43 3 <sup>rd</sup> Avenu p: No Class 2 lved: Yes e of sod Need	e Class 3 □ No ⊠ ded: quest is for t	
Questions concerning tree size(s) shall be add Supervisor or the Senior Contracting Officer pagreement by all parties shall be paid in acco should be sent to the address listed below.	orior to the perfor	mance of the wo	ork. Any work performed without
Approved by County Representative	ve : Brenda F	Press Date:1	0/19/16
Work completed and OK to Pay: Y	'es ⊠ No □		
Inspected by: Robert Baker dat	te: 10- <mark>28-20</mark> 1	<u>l6</u>	
Invoice #: 1029			

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

Revised: 6-29-2012



To: Native Land and Tree From:	Public Works/F	Road Ops		
Fax: 352-330-1600 Pages:	1			
Phone: 352-266-7970	Date:	10/19/2016		
E-Mail: buffy@nativelandandtree.com	n			
TREE REMOVAL REQUEST				
Road Name: 3 <sup>rd</sup> Avenue Segment #: 225  Nearest City: Ferndale  Address: 18743 3 <sup>rd</sup> Avenue (tree is located Section: 34 Township: 21 Range: Description of Tree: 60" oak tree  Location of Tree: Across from 18743 3 <sup>rd</sup> A  Size of tree (s): 60"  Grind Stump: Yes Remove Stump: No  If trim what class: Class 1 Class 2  Power Lines or other hazards involved: Yes  Sod: Yes No X Type of sod	l across from this 26 venue Class 3 s No	s address)		
Comments: Part of the tree has fallen. The that is remaining and the section that has		the removal of the tree		
Questions concerning tree size(s) shall be addressed and agreed upon in writing by either the Maintenance Area Supervisor or the Senior Contracting Officer 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 County Representative : Brenda Press Date:10/19/16				
Work completed and OK to Pay: Yes N	<u> </u>			
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

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To: Native Land & Tree	From: Publ	lic Works/Road Ops	
Fax:	Pages:	1	
Phone:	Date:	10/19/2016	
E-Mail:			
TREE REMOVAL REQUEST		Native Total	
Road Name: 3 <sup>rd</sup> Ave Segment No	o.: 2257-01	60" Oak \$3,100 \$4,0	
Nearest City:Ferndale Address: Across from 18743 3 <sup>rd</sup>	Ave	60° stump \$ 500 \$ 4	
Section 34 Township: 21 Description of Tree: Large Oak		\$3,600 \$4,4	
Location of Tree: Acroos from 18 Size of tree (s): 60 inches across	743 3 <sup>rd</sup> Ave		
Grind Stump? Yes Remove Stur  If trim what class? Class 1	np? Class 2	Class 3	
Power Lines or other hazards invo	olved? Yes	No No	
Sod? Yes No	Type of soc		
Comments:Part of the tree has fa	llen and need	ds to be cleaned up.	
or designee prior to the performance of the	work. Any work p	eed upon in writing by either the Project Manager performed without agreement by all parties shall be act. Invoices should be sent to the address listed	
Approved by:	Date:		
<u>County Representat</u>	<u>IVE</u>		
Work Completed and OK to Pay: Yes No Date:			
Invoice #		Date.	