



SUBIC BAY METROPOLITAN AUTHORITY

REGULATORY GROUP ECOLOGY CENTER

Regulatory Bldg., Labitan St., cor. Rizal Highway, Subic Bay Freeport Zone, Philippines 2222 (63-47) 252-4059 Fax (63-47) 252-4157

TREE TRIMMING/CUTTING/RELOCATION REQUEST

(Please complete all required info)

- A. Requested by:
B. SBMA Resident Others (specify) Contact No
C. Address:
D. Request permit to cut tree/s (specify location of tree/s) trim branches of trees (specify location) relocate tree/s from to
E. Reason/s for the above request

MODE OF REQUEST:
thru phone thru fax in person
other means:

Applicant's Printed Name and Signature or Printed Name and Signature of Authorized Representative, in the absence of the owner
Available Date/Time for Inspection Purposes:

Request received by: Date/Time:
(This portion to be filled up by Ecology Center personnel)

INSPECTION REPORT

- A. Date/Time Request for Inspection was Received: Received by:
B. FINDINGS:
1. Date/Time inspected:
2. Area Category: Public Residential Commercial Industrial Recreational Others

Table with columns: TREE SPECIES, NO. OF TREE/S, DIAMETER (cm.), CONDITION OF TREE DURING INSPECTION (Dead, Live, Fallen, De-cayed), RECOMMENDATIONS (CUT, TRIM, RELOCATE, OR TREAT, ETC?)

Other Actions Required (use additional sheet, if necessary):

3. Additional Findings / Comments/Recommendations (if any):

(Inspector's Printed Name and Signature)

CONFORME: Name, designation and signature of contact person during time of inspection

Date/Time Forwarded to RPD for Permit Processing: Received by:

OTHER INSTRUCTIONS (state name of person giving instruction) Date/Time Given:

- [] Replacement No. of saplings: Species:
[] Other instructions: