Department of Public Works

## Streets Division – Forestry

Charlie Romines, Superintendent

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Madison, WI 53715

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[cityofmadison.com/forestry](https://www.cityofmadison.com/forestry)

# Consulting Arborist Report – Building Move Application

**Madison General Ordinances Section 28.185(7) (a) 5** requires the Plan Commission to consider a report of the City forester regarding the impact a proposed building relocation could have on City street trees, Section 29.12(2)(a) requires that the City forester approve the route along which a building will travel, and Section 29.12(2)(f) requires that no tree or shrub be trimmed or disturbed without the approval of the city forester or property owner.

In exercising its responsibility under the foregoing ordinances, the forestry section requires the applicant to submit a street tree report from a certified arborist. The forestry section will evaluate the report below for street tree pruning and removal as part of the approval process. The forestry section will charge the applicant for street tree pruning for road clearance beyond the standard 14 feet and any street tree removal and work will be completed on overtime. If it is necessary to remove a street tree, the applicant will be responsible for the cost of street tree replacement(s) and the removal of the stump. The street tree replacement will be a minimum of 2-inches in diameter per tree. Forestry will designate tree type and planting location.

The actual size, width and height of the building during the move is critical to understanding the impacts upon public and private trees during the move. The forestry section must be informed of any change in this information as it could impact the forestry section’s report and approval.

Please note that pruning beyond what is considered to be acceptable by **ANSI A300 Pruning Standards** or if street tree removal is needed, the applicant is required to be present at a public hearing of the habitat stewardship committee. The applicant shall be required to notify affected property owners of this hearing following the requirements of Madison General Ordinance 10.101. A deposit is required once the application is approved and before any work is scheduled.

A building move permit does not grant the applicant the authority to trim or remove any private tree. It is the responsibility of the applicant to make arrangements for the pruning of private trees for the building move. The applicant must get homeowner approval in writing prior to pruning or disturbing any private trees. Additionally, the applicant should have a private tree care company onsite during the building move to address any unforeseen pruning of private tree branches/limbs.

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| **SECTION 1 –** Applicant INFORMATION AND PROPOSED ROUTE |

### APPLICANT

NAME

BUSINESS PHONE       CELL PHONE       EMAIL

MAILING ADDRESS

CITY       STATE       ZIP

### BUILDING MOVER COMPANY

NAME

BUSINESS PHONE       CELL PHONE       EMAIL

MAILING ADDRESS

CITY       STATE       ZIP

### ARBORIST CONSULTING FIRM

NAME

BUSINESS PHONE       CELL PHONE       EMAIL

MAILING ADDRESS

CITY       STATE       ZIP

CONSULTING ARBORIST PROVIDING REVIEW       ISA CERTIFICATION NUMBER

### WORK LOCATION

STREET ADDRESS

CROSS STREETS

DATE OF PROPOSED HOUSE MOVE

BUILDING SIZE: LENGTH       FEET WIDTH       FEET HEIGHT       FEET

PROPOSED ROUTE WITH STREET NAMES AND BLOCK NUMBERS LISTED:

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PLEASE ATTACH A **MAP** OF PROPOSED ROUTE WITH TREES CORRESPONDING WITH LOCAITON ON **MAP.**

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| SECTION 2 – Street Tree Inventory OF PROPOSED HOUSE MOVE |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TREE | Address | Species | Location Description | Trunk Diameter - (Inch) (dbh) | Canopy Spread (Ft) | Current limb height (Ft.) (Over the Road) | Total number of limbs to be pruned that hang lower than  14 feet. | Removal (R)  \*\*Photos required\*\* | Trunk/Roots  Structure/Health | Tree Canopy -  Structure/Health/  Decline % | Additional Notes Attached  Below? (Yes/No) |
| **1** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **2** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **3** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **4** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **5** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **6** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **7** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **8** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **9** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **10** |  |  |  |  |  |  |  |  |  |  | Yes  No |

Additional notes:

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|  |

Describe impacts and any mitigation actions employed:

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Identify the addresses of privately owned trees impacted by the building move and the work to be completed by private tree care company. Please note that any oak tree pruning or removal from April 1 thru October 15 will need approval from City Forestry per Madison General Ordinance 23.40.

|  |  |  |  |
| --- | --- | --- | --- |
| **Address** | | **Tree Species** | **Work to be Completed** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |

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| SECTION 3 – PHOTO DOCUMENTATION |

Please attach photos. The group of photos must include:

* A photo to best depict the street tree relative to building move impact
* Timestamp

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| SIGNATURE CERTIFICATION |

I hereby certify that I have presented an accurate and truthful representation of the proposed building move including the height and width of the building to being moved, a proposed move route and an inventory of affected street trees and their condition herein, and that I will update this information and this report should any of this information change. I have worked to ensure compliance with all accepted professional standards in arboricultural practices and to ensure compliance with all applicable laws, regulations, policies and ethical standards. In the event the house move contractor has failed to comply with all applicable laws, regulations, policies and ethical standards; or created conditions that may present a hazard to people or property, I have immediately notified the appropriate representative of City of Madison Forestry Section.

consulting arborist signature isa certification #

building mover representative signature

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| --- | --- | --- | --- |
| DO NOT WRITE BELOW THIS LINE | | | |
| CITY OF MADISON FORESTRY SECTION OFFICE USE ONLY: | | | |
| CONSULTING ARBORIST REPORT | |  | |
| APPROVED | REJECTED | DATE: | REVISED DATE |
| CITY EMPLOYEE NAME | | | TITLE |
| SIGNATURE OF CITY EMPLOYEE | | | |
| DEPOSIT REQUIRED $ | | | DEPOSIT RECEIVED |

|  |
| --- |
| LIST OF ADDITIONAL STREET TREE INVENTORY OF PROPOSED HOUSE MOVE |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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| **4** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **5** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **6** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **7** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **8** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **9** |  |  |  |  |  |  |  |  |  |  | Yes  No |
| **10** |  |  |  |  |  |  |  |  |  |  | Yes  No |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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