CITY OF FARMINGTON HILLS

TREE PROTECTION ORDINANCE AFFIDAVIT

(no tree survey/permit required)

STATE OF MICHIGAN)
)SS.
COUNTY OF OAKLAND)

The undersigned, first being duly sworn, deposes and says:

1. That the undersigned is the Owner and/or Developer of the following described property located in the City of Farmington Hills, Oakland County, Michigan to-wit:
   Street Address:_____Lot #: _____
   _____
2. That the undersigned made this Affidavit for the purposes of obtaining a Building Permit from the City of Farmington Hills in compliance with all applicable Ordinances;
3. That the undersigned is familiar with the provisions and requirements of the Farmington Hills Zoning Ordinance and, in particular, those sections that relate to the protection, removal and replacement of trees as defined in the Ordinance (Section 34-3, Definitions, and Section 34-559, Tree Protection, Removal and Replacement);
4. That the undersigned has visited and inspected the premises in light of the requirements of the provisions of the Zoning Ordinance, above mentioned;
5. That attached to this Affidavit are photographs of the property which accurately portray the lack of trees on the property and support the fact that no trees will be removed and/or no work will occur within the dripline of any trees, and therefore, no tree survey is necessary or required and no tree permit is therefore necessary or required. The attached photos were taken on: _____, 20_____.
6. That the undersigned makes this Affidavit with full knowledge of the requirements of the applicable Ordinance after having visited and inspected the site with the understanding that if any inaccuracies or misrepresentations have been made, herein, which are relied upon by the City, and which are subsequently discovered, the City will issue a Stop Work Order for all work on the site which the undersigned will comply with until all requirements of the Ordinance are complied with.

Further, Deponent saith not.
Executed this _____ day of _____, 20_____.

OWNER/DEVELOPER:

_____ _____
(Signature) (Printed Name)

_____ _____
(Address) (Telephone)

Subscribed and sworn to before me this _____ day of _____, 20_____.

_____
Notary Public, Oakland County, Michigan
My Commission expires:_____

PLANNING DEPARTMENT AUTHORIZATION

_____ _____
(Signature) (Witness)