



FIVE-YEAR TREE MAINTENANCE REPORT

TREE PRUNING AND/OR REMOVAL

Date of Report **Tree ID Number** **Date when Tree was Planted**

Reports are due on or before the anniversary date of when the tree was first planted.

Reporting Year	YEAR 0	YEAR 1	YEAR 2
	YEAR 3	YEAR 4	YEAR 5

Parcel ID

Property Name

Address

Lessee

Contractor

ANNUAL EVALUATION
TREE MAINTENANCE REPORT

**NO OF IMAGES
ATTACHED**

TREE SPECIES Common or Scientific Name

DIMENSIONS Height (ft.) **Spread/Canopy (ft.)**

MATURE FOLIAGE Avg. length (in.) **Avg. width (in.)**

TREE TRUNK Diameter (in.) **DENSITY OF CANOPY**
(% visible thru foliage)

HEALTH STATUS INDICATORS	Current Status of Tree	HEALTHY	Color of Foliage	GREEN
		UNHEALTHY		BROWN
		DEAD		OTHER

SOIL MOISTURE Within 3 ft. from tree trunk WET MOIST DRY

PRESENT FEATURES	Tree Features	FLOWERS	FRUITS
	Other items found on tree	BIRD NESTS FUNGI/MUSHROOMS	PESTS/INSECTS

COMMENTS/REMARKS

TREE MAINTENANCE
RESPONSIBLE PARTY

**MAINTAINED
BY**

LESSEE
CONTRACTOR

Last Name

First Name

MI

Employer

Employee Title

Daytime Tel.

After Hours Tel.

MAINTENANCE REPORT PREPARER
CONTACT INFORMATION

**AFFILIATION
WITH LESSEE**

Last Name

First Name

MI

Address

City

State

Zip Code

Daytime Tel.

After Hours Tel.

E-mail

FOR INTERNAL USE ONLY

ASSET MANAGEMENT DIVISION
VERIFY AND FLAG FOR ACCEPTANCE

**AMD AGENT
ACTION**

VERIFIED: FORWARD TO PLN
HOLD: CONTACT APPLICANT

Agent Comments

**Verified
Action Date**

**Verified
by Agent**

PLANNING DIVISION
FINALIZE OR FLAG FOR FOLLOW-UP

**PLN SPEC
ACTION**

FINALIZED: RETURN TO AGENT
FLAGGED: INSTRUCT AGENT

Planner Comments

**Finalized
Action Date**

**Finalized
by Planner**