

ARBORIST PERMIT APPLICATION

OFFICE USE:

MUNICIPALITY: **TOWN OF JOHNSTON**

APPLICATION DATE: _____

NUMERICAL CODE: _____ PERMIT NO.: _____

FEE RECEIVED: \$ _____ BY: _____

01. STREET LOCATION _____

02. ZONING DISITRICT _____

03. Plat/Map: _____

04. Lot/Block: _____

0.5 Permit review

(check one)

- Residential - single lot
- Residential - subdivision
- Residential - multifamily
- Residential - planned division
- Nonresidential - less than 1/2 acre
- Nonresidential - 1/2 acre to less than 5 acres
- Nonresidential - 5 acres or more disturb 1 acre or less
- Nonresidential - 5 acres or more disturb more than 1 acre
- Retaining Walls
- Landscaping

06. Ownership (circle one) PUBLIC or PRIVATE

07. OWNER: _____

09:ADDRESS: _____

CONTRACTOR OR THE COMPANY DOING THE WORK

10. CONTRACTOR: _____

11. TEL.NO.: _____

12. CONTRACTOR ADDRESS: _____

13. RI CONTR. REG #: _____

14. EXPIR. DATE: _____

15. DESCRIPTION OF WORK TO BE PERFORMED: _____

PLEASE PRINT - APPLICANT TO COMPLETE ALL ITEMS

NUMBER OF TRUCKS _____ X \$15.00 _____ PER DAY= TOTAL PERMIT FEE \$ _____

Provided that the person accepting this permit shall in ever respect conform to the terms of the application on file in this office and to the provisions of the Statutes and Ordinances relateing to Health/Safety, Zoning, Construction, DEM, Planning and Erosion in the municipality and shall begin work on said site within **SIX MONTHS** from the date hereot and prosecute the work thereon to a speed completion.

Any person who shall violate any of the Statutes and Ordinance relating to Health/Safety, Zoning, Construction, DEM, Planning and Soil Erosion in the municipality shall be punished by penalties imposed by the State Building Code =, RIDEM, and Local Ordinances.

**I hereby certify that I have the authority to make the foregoing application, that the application is correct, and
that the owner of this site and the undersigned agree to conform to all applicable codes and ordinance of this jurisdiction**

Tel.: _____

Applicant's Signature: _____

For: _____

Date: _____