



City of Lake Saint Louis

Annual Arborist License Application

This license application is to be completed by the owner or operator of a tree service, arboricultural firm or any business that is in the National Council on Compensation Insurance, Inc. classification code 0106- tree pruning, spraying, all operations and drivers and intending to work on public or private property within the City of Lake Saint Louis.

Applicant's Name: _____

Address: _____

Company Name: _____

Company Address (if different from above): _____

Primary Telephone: _____ Secondary Telephone: _____

E-mail Address: _____

ISA certified Arborist Name: _____

ISA certification Number: _____

I hereby make application to the City of Lake Saint Louis for the Annual Arborist License that will permit my company to prune, apply chemical treatment or remove from service trees equal to or greater than twelve inches in diameter (12" DBH) on public or private property within the City of Lake Saint Louis.

I understand this application requires proof of the following criteria:

- ✓ A current Certificate of Insurance in the amount of at least five hundred thousand dollars (\$500,000.00), with the City of Lake Saint Louis as Certificate Holder.
- ✓ A minimum of one (1) employee be an International Society of Arboriculture (ISA) certified arborist.
- ✓ Annual fee of twenty-five dollars (\$25.00)

For additional information and the full listings of City of Lake Saint Louis Codes and Ordinances, visit www.lakesaintlouis.com.

Applicant Signature _____

Date _____

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|---------------------------------|------------|
| For City Office Use Only | |
| Approved By _____ | Date _____ |
| License # _____ | |