

City of Petaluma, California Public Works and Utilities Department 707.778.4303, Option 6

UTILITY VEGETATION MANAGEMENT NOTIFICATION TO THE CITY OF PETALUMA

	fication to the City of Petalur any the Encroachment Permi		
Today's Date			
Type of Work to Be Co	mpleted \square Tree Trimming	\square Tree Removal	
Utility Company: Contact Name: Contact E-mail:		Contact Phone #	
Subcontractor Name Subcontractor Contactor E-mail:	of Business (if used): ct Name:	Contact Phone #	
Who is the contact for	this notification: \square Utility Con	npany 🗆 Subcontrac	tor
and the approximate	e of the street or addresses th date the work is to be done. To work and for all inspection i	Note, there is a minimun	n of 24-hour
Tree Trimming: (if one	address state the address; if s	several addresses, list the	street(s):
Approx. date to be trimmed	Address or Name of Street		
Tree Removals:			
Approx. date to be removed	Address or Name of Street		How many trees to be removed at location

If more room is needed, please list on an additional page with above information.