

FOR OFFICE USE ONLY						
File# -			_			
Filing Date:		Acceptance Date:				

Town of Hilliard Deposit for the Harvest of Timber

Α.	Property
1.	Address of Subject Property:
2.	Parcel ID Number(s):
3.	Existing Use of Property:
4.	Zoning Designation:
5.	Number of Chickens:
6.	Acreage of Parcel:
В.	Owner
1.	Name of Owner(s) or Contact Person(s):Title:
	Mailing address:
	City:State:ZIP:
	Telephone: () FAX: () e-mail:

- C. ATTACHMENTS (One copy plus one copy in PDF format)
- 1. Warranty Deed or other proof of ownership.
- 2. A Written Description of work to be done including projected time frame for completion.

All 2 attachments are required for a complete application.

Property owners may cut trees on their property except to the extent the trees sought to be cut are on the unimproved Rights-of-Way and Alleyways of the Town of Hilliard. Property Owners may give written permission to an agent to cut trees that they could otherwise cut under this ordinance. Trees on the unimproved Rights-of-Way and Alleyways of the Town of Hilliard may only be cut upon the application to the Clerk for the Town of Hilliard. Such applicants or their agents are required to post a cash bond for \$500 in substantially the following form:

CASH BOND FOR TREE CUTTING ON HILLIARD UNIMPROVED RIGHTS-OF-WAY AND ALLEYWAYS

Unimproved Rights-of-Way and Alleyways identified as follows:				
THE STATE OF FLORIDA)				
COUNTY OF)				
benefit of the Town of Hilliard, in the a above obligation is that I swear that I a and Alleyways set forth above and/or I that I have authority to execute this bove event take more than 20 days after last referenced unimproved Rights-of-Way at least as good a condition as they were any trees that were in the same or contappear to be a hazard to people or proportion remain in full force and effect.	amount of \$ am the own have been d and in all re cut, to ens and Alleyv re before th iguous area erty, at wh	er of the property adjoining the unit esignated to act as the agent of suc- spects and further swear that I will ure that the ditches and culverts in ways that are cut will be cleared of a e issuance of this bond and that I was that lean on or towards an improve	n. The condition of the improved Rights-of-Way h owner or owners and promptly, and in no or along the above all debris and returned to ill cause to be removed red Right-of-Way and l and void; otherwise it is	
Signature of Applicant		Signature of Co-applicant		
Typed or printed name and title of applicant		Typed or printed name of co-applicant	_	
Date		Date		
State of	_ County of			
The foregoing application is acknowledged before	re me this	day of, 20, by		
, who is/are personally kn	nown to me, o	r who has/have produced		
as identification.				
NOTARY SEAL				
	Signati	ure of Notary Public. State of		

Town of Hilliard ◆15859 C.R. 108 ◆ Hilliard, FL 32046 ◆ (904) 845-3555

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