

TOWN OF PERU

P.O. Box 429 / 26 Main Street, Peru, 04290

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www.townofperumaine.org

TREE CUTTING / MISC. APPLICATION / PERMIT

Property Owner(s): _____ Valid period: _____
(to be completed by CEO)

Owner's Mailing address Phone # email address

Property address Town Map # Lot # Lot size

Details/Description of Request:

****Suggested: Attach a copy of the Tax Map indicating location of trees to be cut or sketch below.****

To be completed by CEO:

_____ Denied – reason for denial:

_____ Approved – conditions:

Property Owner's Signature Date

Code Enforcement Officer, Randy Thurston Date

NOTE: Cutting within Shoreland Zoning shall comply with the requirements of PERU'S SHORELAND ZONING ORDINANCE.