

Instructions Arborist Verification of Major Pruning for Tree Health

County of Ventura • Resource Management Agency • Planning Division 800 S. Victoria Ave., Ventura, CA 93009 • (805)654-2488 • www.ventura.org/rma/planning/Permits/tree.html

Oak, sycamore and other trees over a certain size are protected by Ventura County and subject to the requirements of the Ventura County Tree Protection Ordinance. Other than minor pruning, the removal, alteration or encroachment into the tree protection zone (TPZ) of a (living or dead) protected tree requires the approval of the Ventura County Planning Division.

Before the Planning Division will approve a request to alter or remove protected trees, a technical evaluation from a qualified arborist must be submitted (in most cases). These technical evaluations can either be in the form of an Arborist Verification or an Arborist Report. An Arborist Verification provides basic, targeted information on a County form. An Arborist Report provides more comprehensive information that adheres to the County's content requirements. For most ministerial tree permits and authorization letters, an Arborist Verification is required. For discretionary tree permits, an Arborist Report is required.

Major Pruning for Tree Health. Major pruning involves pruning limbs or roots that are greater than 20 percent of the tree's girth or pruning that overall will amount to more than 20 percent of the trees canopy or root system. Major pruning is only justified for the health or stability of the tree.

The only required documentation for approval of major pruning is the Arborist Verification, which must include photos and a simple site sketch. An Authorization Letter is issued by the County if approved.

Required Content. Arborist Verification's include the completed form (Cover Page and Tree Evaluation) and the following:

- **Photos**. 1 to 4 color photos per affected tree or stand are required. The photos should be taken from different vantage points, clearly illustrate the reason for the request, and help locate the tree relative to nearby landmarks. Prints must be a minimum of 4" x 6." Digital files are requested.
- Site Sketch or Plan. In the case of requests for major pruning of protected trees, a simple site sketch prepared by the arborist must be included with the request.
- Tree Protection Fencing Sketch or Plan. The arborist must indicate on the site sketch any
 remaining trees that require tree protection fencing, and where that fencing should be located.

Arborist Qualifications. Arborist Verifications must be prepared by an arborist certified by the International Society of Arboriculture (ISA) or a related professional, such as a landscape architect, with qualifying education, knowledge and experience, as determined by the Planning Director.

Prior to hiring an arborist, it is recommended that the applicant contact the Planning Division to determine the specific type of Arborist Verification required.

Arborist Verifications that provide inadequate information will be returned as INCOMPLETE.

For more information on the Tree Protection Ordinance including the County's list of protected trees, go to www.ventura.org/rma/planning/Permits/tree.html.



Cover Page Arborist Verification of Major Pruning for Tree Health

County of Ventura • Resource Management Agency • Planning Division 800 S. Victoria Ave., Ventura, CA 93009 • (805)654-2488 • www.ventura.org/rma/planning/Permits/tree.html

	STAFF USE	Case #	
	Date Received:	Received By:	
	# of Color Photos Rec'd (1 per tre	ee min.) □Prop	osed □After-the-fact
	☐Site Sketch Rec'd (required)	□Approved □	Denied □No action
# of Trees Evaluated			
Reason for Request			
PROPERTY WHERE WORK WILL BE PE			
Site Address	Parcel (APN) #		
Owner of Property/Easement Where Work w	ill be Performed		
Phone # () Email_			
Mailing Address	City	State	Zip
REQUESTED BY (if different than owner) Name			
Phone # () Email_			
Mailing Address	City	State	Zip
Relationship to Owner			
ARBORIST			
Name	Certification # (ISA or re	lated)	
Phone # () Email_			
Mailing Address	City	State	Zip
SIGNATURE			
I am the property or easement owner where the propos on behalf of the owner on all matters related to this req permit. I understand that the opinions of the arborist in inspection. This visual record does not include aerial of hazards. This Arborist Verification does not substitute f	uest of the Ventura County Plannir this Arborist Verification are based r subterranean inspections, and the	ng Division for a land u solely on visual record erefore may not reveal	se entitlement or tree ds at the time of
Owner Signature	Print Name		
Relationship to Owner (if other than)		Date	

Tree Evaluation

Arborist Verification of Major Pruning for Tree Health

Arborist should complete one evaluation per tree; however if Section B info is the same for a stand of trees, one evaluation may be used for all, with only Section A repeated for the individual trees. Alternate formats for large numbers of trees may be acceptable. Inspection Date _____ Section A # of Trunks _____ Girth ____ Height ____ Canopy Spread _____ Tree health: A (Excellent) / B (Average) / C (Fair) / D (Poor) / F (Dead/dying) Section B Tree location: (include distance from a fixed landmark) Describe how pruning will help the health or stability of the tree ______ **Recommended Health Pruning** ■ None ☐ Reduce/remove limb N/S/E/W ■ Remove dead wood/stubs □ Other ☐ Structural pruning for stability Estimated total number of branches to be pruned ______ Limb diameter of each of the above Overall, _______ % of the tree's canopy recommended for pruning. □ Spread of disease or insects from this tree is a concern. Provide an explanation and recommendations (such as for debris disposal) Tree Environment Remediation (for care of tree) ■ None ■ Treat pests ☐ Irrigate less / more ☐ Cable/pin/support ☐ Remove/replace nursery stake ☐ Keep water away from tree trunk ☐ Remove Tree Protection Zone soil/debris ☐ Other _____ Other observations Arborist Signature: Date: