



## MUTUAL LANDSCAPE REQUEST FORM

**PLEASE NOTE: THIS FORM IS NOT INTENDED FOR ROUTINE MAINTENANCE REQUESTS**

For all non-routine requests, please fill out this form. Per the policy of your Mutual, if your request falls outside the scope of the managing agent’s authority, it will be forwarded to the Mutual’s Landscape Committee for review. If you are unsure whether your request falls into this category, first contact Resident Services at 597-4600 in order to make that determination.

**PLEASE RETURN COMPLETED REQUEST FORM TO RESIDENT SERVICES.**

### Resident/Owner Information

*You must be an owner to request non-routine Landscape requests.*

\_\_\_\_\_  
Address

\_\_\_\_\_  
Today’s Date

\_\_\_\_\_  
Resident’s Name

\_\_\_\_\_  
Telephone Number

### Non-Routine Request

*Please checkmark the item that best describes your request. If none apply, please checkmark “Other” and explain.*

Tree Removal

New Landscape

Off-Schedule Trimming

Other (explain): \_\_\_\_\_

### Reason for Request

*Please checkmark the item(s) that best explain the reason for your request.*

Structural Damage    Sewer Damage    Overgrown    Poor Condition

Litter/Debris    Personal Preference

Other (explain): \_\_\_\_\_

#### **GUIDELINES:**

- **Structural/Sewer Damage:** Damage to buildings, sidewalks, sewer pipes, or other facilities may justify removal if corrective measures are not practical.
- **Overgrown/Crowded:** Trees or plants that have outgrown the available space may justify removal.
- **Damaged/Declining Health:** Trees or plants that are declining in health will be evaluated for corrective action before removal/replacement is considered.
- **Litter and Debris:** Because all trees shed litter seasonally, this is not an adequate reason to justify removal.
- **Personal Preference:** Because one does not like the appearance or other characteristics of the tree or plant does not justify its removal.
- **View Obstruction:** Trees will not be off-schedule trimmed or removed due to view obstruction.

**Description & Location of Request**

*Please briefly describe the situation and the exact location of the subject of the request (e.g., "roots of pine tree in front of manor XYZ are lifting the sidewalk"). Attach pictures as necessary.*

---



---



---

**Signatures of All Neighbors Affected By This Request**

*Because your request may affect one or more of your neighbors, it is imperative that you obtain their signatures, manor numbers, and whether they are for, undecided, or against this request.*

Signature	Manor #	For	Undecided	Against

(Please attach a separate sheet if more signatures are necessary.)

**Acknowledgement - Owner**

*By signing, you are acknowledging this request.*

\_\_\_\_\_   
 Owner's Signature

\_\_\_\_\_   
 Owner's Name

**OFFICE USE ONLY**

MOVE-IN DATE: \_\_\_\_\_

DATE: \_\_\_\_\_ INITIALS: \_\_\_\_\_

530 \_\_\_\_\_ 540 \_\_\_\_\_

570 \_\_\_\_\_ LAST PRUNED: \_\_\_\_\_

RELANDSCAPED: \_\_\_\_\_

NEXT TIME: \_\_\_\_\_

TREE SPECIES: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

TREE VALUE: \_\_\_\_\_ TREE REMOVAL COST: \_\_\_\_\_