



Town of Loxahatchee Groves

155 F Road, Loxahatchee Groves, Florida 33470

Phone (561) 793-2418

Fax (561) 793-2420

VEGETATION REMOVAL PERMIT (VRP) APPLICATION

Date Received	
Application Number	
Cost Recovery Deposit \$2,034. Any additional costs will be assessed and added to the Cost Recovery Deposit.	
Fee Receipt Number	

General Data

Project Name	
Property Location Address	
Parcel Control Number(s)	
Land Clearing Request	
Number of Acres	
General Control Number (Staff Assigned)	

Site Data

Current Land Use	
Current FLU	
Current Zoning	
Proposed Land Use	
Proposed FLU	
Proposed Zoning	
Frontage	
Plat, Subdivision, Legal Lot of Record	

Owner Information

	Owner A	Owner B	Owner C
Name			
Street Address			
City, State, Zip			
Phone Number			
Fax Number			
Email Address			



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Applicant Information (If Other Than Owner)

	Owner A	Owner B	Owner C
Name			
Street Address			
City, State, Zip			
Phone Number			
Fax Number			
Email Address			
Type (Lessee, Contract Purchaser, Other)			

Agent Information

Name	
Organization/Company	
Street Address	
City, State, Zip	
Phone Number	
Fax Number	
Email Address	
Relationship to Property	

Required Attachments

- Legal Description, Warranty Deed and Parcel Control Numbers (PCN's)
- Certified Survey and corresponding list of trees to be retained, relocated and removed
- Approved Site Plan or Concept Plan of proposed site improvements
- Attachment A – Applicants Ownership Affidavit
- Attachment B – Agent Consent Form
- Attachment C – List of Supplemental Applications
- Attachment D – Tree Replacement Tables



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Conditions of Approval

Office Use Area

This permit does not become valid until signed by an authorized representative of the Town of Loxahatchee Groves and all fees and receipt acknowledged below:

Planning and Zoning Official

Date: _____

Permit Approved _____ or Denied _____

Permit Number: _____

Town Manager

Date: _____



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Attachment A – Applicants Ownership Affidavit

**STATE OF FLORIDA
COUNTY OF PALM BEACH**

_____ /

BEFORE ME THIS DAY PERSONALLY APPEARED _____, WHO BEING DULY SWORN, DEPOSES AND SAYS THAT:

1. He/she is the owner, or the owner’s authorized agent, of the real property legally described in Attachment A;
2. He/she understands any application fee(s) is/are non-refundable and in no way guarantees approval of the request;
3. The statements within the application are true, complete and accurate;
4. He/she understands that all information within the application is subject to verification by Town staff;
5. He/she understands that false statements may result in denial of the application; and
6. He/she understands that he/she may be required to provide additional information and fees within a prescribed time period and that failure to provide the information and fees within the prescribed time period may result in the denial of the application.

FURTHER AFFIANT SAYETH NOT.

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____(Name of Person Acknowledging) who is personally known to me or who has produced _____(type of identification) as identification and who did (did not) take an oath.

(Signature of Person Taking Acknowledgement)

Applicant’s Signature

(Name of Acknowledger Typed, Printed or Stamped)

Applicant’s Name (Print)

(Title or Rank)

Street Address

(Serial Number, if any)

City, State, Zip Code

(Notary’s Seal)

(_____) _____
Telephone



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Attachment B – Agent Consent Form

STATE OF FLORIDA
COUNTY OF PALM BEACH

_____ /

BEFORE ME THIS DAY PERSONALLY APPEARED _____, WHO BEING DULY SWORN, DEPOSES AND SAYS THAT:

- A. He/she is the owner of the real property legally described in Attachment A;
- B. He/she authorizes and designates _____ to act in his/her behalf for the purposes of seeking the following approvals for the real property legally described in Attachment A;
 - 1. _____
 - 2. _____
 - 3. _____
- C. He/she has examined the above listed application(s) and he/she understands how the proposed change may affect the real property legally described in Attachment A.

FURTHER AFFIANT SAYETH NOT.

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____ (Name of Person Acknowledging) who is personally known to me or who has produced _____ (type of identification) as identification and who did (did not) take an oath.

(Signature of Person Taking Acknowledgement)

Owner's Signature

(Name of Acknowledger Typed, Printed or Stamped)

Owner's Name (Print)

(Title or Rank)

Street Address

(Serial Number, if any)

City, State, Zip Code

(Notary's Seal)

(_____) _____
Telephone



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Attachment C – Category A or B Special Exception Approval



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**Attachment D – Tree Replacement Tables
(Attach Survey Indicating Tagged Tree Locations and wetlands)**

TREE MITIGATION REQUIREMENTS

A. Tree Replacement Tables (Attach Survey Indicating Tagged Tree Locations and wetlands):

1. Species: _____

Tree Height/DBH*	Number of Trees Removed	Replacement Rate	Trees to be Replaced
24 ft. and up and 6 inch or greater DBH*		1 tree at same size or 2 at 18 – 20 feet in height/removed tree	
16 feet to less than 24 ft. in height with a 4 -6 inch DBH		1 tree at 18 feet to 20 feet in height with a 4 – 6 inch DBH /removed tree	
12 feet to less than 16 ft. in height with a 2 -4 inch DBH		1 tree at 12 feet to 16 feet in height with a 2 – 4 inch DBH /removed tree	
Less than 12 ft., with less than 2 inch DBH		0 trees/removed tree	
Totals		NA	

DBH = Diameter @ Breast Ht.; * - Trees to be field tagged

2. Species: _____

Tree Height/DBH*	Number of Trees Removed	Replacement Rate	Trees to be Replaced
24 ft. and up and 6 inch or greater DBH*		1 tree at same size or 2 at 18 – 20 feet in height/removed tree	
16 feet to less than 24 ft. in height with a 4 -6 inch DBH		1 tree at 18 feet to 20 feet in height with a 4 – 6 inch DBH /removed tree	
12 feet to less than 16 ft. in height with a 2 -4 inch DBH		1 tree at 12 feet to 16 feet in height with a 2 – 4 inch DBH /removed tree	
Less than 12 ft., with less than 2 inch DBH		0 trees/removed tree	
Totals		NA	

DBH = Diameter @ Breast Ht.; * - Trees to be field tagged



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3. Species: _____

Tree Height/DBH	Number of Trees Removed	Replacement Rate	Trees to be Replaced
24 ft. and up and 6 inch or greater DBH*		1 tree at same size or 2 at 18 – 20 feet in height/removed tree	
16 feet to less than 24 ft. in height with a 4 -6 inch DBH		1 tree at 18 feet to 20 feet in height with a 4 – 6 inch DBH /removed tree	
12 feet to less than 16 ft. in height with a 2 -4 inch DBH		1 tree at 12 feet to 16 feet in height with a 2 – 4 inch DBH /removed tree	
Less than 12 ft., with less than 2 inch DBH		0 trees/removed tree	
Totals		NA	

DBH = Diameter @ Breast Ht.; * - Trees to be field tagged

4. Species: _____

Tree Height/DBH	Number of Trees Removed	Replacement Rate	Trees to be Replaced
24 ft. and up and 6 inch or greater DBH*		1 tree at same size or 2 at 18 – 20 feet in height/removed tree	
16 feet to less than 24 ft. in height with a 4 -6 inch DBH		1 tree at 18 feet to 20 feet in height with a 4 – 6 inch DBH /removed tree	
12 feet to less than 16 ft. in height with a 2 -4 inch DBH		1 tree at 12 feet to 16 feet in height with a 2 – 4 inch DBH /removed tree	
Less than 12 ft., with less than 2 inch DBH		0 trees/removed tree	
Totals		NA	

DBH = Diameter @ Breast Ht.; * - Trees to be field tagged



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5. Species: _____

Tree Height/DBH	Number of Trees Removed	Replacement Rate	Trees to be Replaced
24 ft. and up and 6 inch or greater DBH*		1 tree at same size or 2 at 18 – 20 feet in height/removed tree	
16 feet to less than 24 ft. in height with a 4 -6 inch DBH		1 tree at 18 feet to 20 feet in height with a 4 – 6 inch DBH /removed tree	
12 feet to less than 16 ft. in height with a 2 -4 inch DBH		1 tree at 12 feet to 16 feet in height with a 2 – 4 inch DBH /removed tree	
Less than 12 ft., with less than 2 inch DBH		0 trees/removed tree	
Totals		NA	

DBH = Diameter @ Breast Ht.; * - Trees to be field tagged

6. Species: _____

Tree Height/DBH	Number of Trees Removed	Replacement Rate	Trees to be Replaced
24 ft. and up and 6 inch or greater DBH*		1 tree at same size or 2 at 18 – 20 feet in height/removed tree	
16 feet to less than 24 ft. in height with a 4 -6 inch DBH		1 tree at 18 feet to 20 feet in height with a 4 – 6 inch DBH /removed tree	
12 feet to less than 16 ft. in height with a 2 -4 inch DBH		1 tree at 12 feet to 16 feet in height with a 2 – 4 inch DBH /removed tree	
Less than 12 ft., with less than 2 inch DBH		0 trees/removed tree	
Totals		NA	

DBH = Diameter @ Breast Ht.; * - Trees to be field tagged



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B. Replacement Tree Summary (From Tables 1 – 6)

Tree DBH*	Number of Trees Removed	Replacement Rate	Trees to be Replaced
2 – 4 inches		1 tree/removed tree	
4 inches to 6 inches		1 tree/removed tree	
6 inches and greater		1 tree/removed tree at same size, or	
6 inches and greater		2 trees/removed tree at 18 – 20 feet in height	
Totals		NA	

C. Typical Replacement Tree Percentages:

Tree Description*	Replacement Percent	Mature Size	Trees to be Replaced
Large Shade Tree	30	25 feet Spread+	
Medium Shade Tree	20	20 feet Spread+	
Flowering Trees	20	18 feet Height.+	
Palms	20	8 feet ct**	
Accent	10	25 feet Spr.+	
Totals	100	NA	

* - Shall comply with the most current version of "Grades and Standards for Nursery Plants Parts I and II"; State of Florida Department of Agriculture, or equivalent thereto.

** - ct = Clear Trunk (i.e. grey wood height)

Alternative tree replacement percentages may be proposed by the Applicant and approved by the Town. However, the total cost of an alternative tree replacement schedule shall not be less than the total replacement cost calculated in Section D.

D. Typical Replacement Tree Costs:

Tree Description*	Replacement Percent	Trees to be Replaced	Unit Cost (\$)	Total Cost (\$)
Large Shade Tree	30			
Medium Shade Tree	20			
Flowering Trees	20			
Palms	20			
Accent	10			
Totals	100			



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E. Alternative Replacement Program (Proposed by Applicant and Approved by the Town of Loxahatchee Groves):

Rather than replacing removed trees, the Applicant may propose one or a combination of the following mitigation alternatives, to be approved by the Town:

1. Enhance required onsite landscaping required by an approved site plan;
2. Transplant removed trees to an offsite location approved by the Town; and/or
3. Make a cash contribution to the Town of Loxahatchee Groves in lieu of on-site mitigation. The cash contribution, equivalent to the cost of trees to be replaced, per Section D above, less any cost of trees provided above code requirements in an approved Landscape Plan. shall be prepared by the Applicant and approved by the Town.