



**TOWN OF COLONIAL BEACH**  
 Department of Planning and Community Development  
 315 Douglas Avenue Colonial Beach, VA 22443  
 (804) 224-7506  
[www.colonialbeachva.gov](http://www.colonialbeachva.gov)

### APPLICATION FOR WOODLOT MANAGEMENT ZONING PERMIT

In order to process your permit, the following items must be submitted. Failure to submit a complete package shall result in a delay in approving and/or releasing the permit.

<b>Woodland Management Application Checklist</b>		
Applicant	Items Required	Staff
	Description of tree(s) to be removed/replanted	
	A letter from a certified arborist certifying the condition of the tree(s)	
	A completed and signed Woodlot Management Permit Application	
	A completed sub-contractor roster (if needed)	
	Permit Fee – check made payable to the “Town of Colonial Beach”	

Below are standards to meet the requirements of the Chesapeake Bay Preservation Act:

**Specific Performance Requirements:**

- Replacement trees must be planted at a 2 to 1 ratio (for every tree removed 2 new trees must be replanted). This ratio is 3 to 1 within the Resource Protection Area (RPA).
- New evergreen trees must have a minimum height of 6-feet at time of planting.
- New deciduous trees must have a minimum caliper of 2.5-inches at time of planting.
- Must be a native tree as listed on DCR website.
- Replanting must occur 6-months after removal.

To close out the permit, a re-inspection of the new planting is required.



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Application Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Owner:	_____	_____
	Name	Daytime Telephone No.
	_____	
	Mailing Address	
	_____	
	E-mail Address	
Contractor Info:	_____	
	Name	Business License #
	_____	

**PROPERTY INFORMATION & RATIONAL FOR REMOVAL**

Address/Directions:
_____
Tax Map/Parcel Number: _____
Trees to be removed (number, type, diameter/size & species):
_____
Reason for removal:
_____
Call applicant before inspection of tree? <input type="checkbox"/> Yes <input type="checkbox"/> No

The undersigned attests that all of the information herein provided and specifically including any and all drawings, landscape plans, etc., required to be furnished by the applicant are true, correct, and accurate to the best of his/her knowledge. Additionally, I grant the Town staff or representatives of other government agencies permission to enter the property to inspect the proposed work and ensure all requirements/ordinances of the Town of Colonial Beach, the Commonwealth of Virginia or the federal government are found to be in compliance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Property Owner or Designated Agent

**STAFF USE ONLY**

**REPLANTING SCHEDULE**

Number, size and species of trees to be Re-planted:

Completion Date of Replanting: \_\_\_\_\_

Fee:\$ \_\_\_\_\_ Date Paid: \_\_\_\_\_

Reason (if denied):  APPROVED  DENIED

\_\_\_\_\_  
Zoning Administrator or Designee's Signature

\_\_\_\_\_  
Date

Comments: