

**INCORPORATED VILLAGE OF FREEPORT
46 NORTH OCEAN AVENUE
FREEPORT, NEW YORK 11520**

APPLICATION FOR CUTTING DOWN TREES

**RETURN TO VILLAGE CLERKS OFFICE
46 North Ocean Avenue, Freeport NY 11520**

APPROVED	
Village of Freeport, Nassau Co., N.Y.	
Claims Examiner: _____	_____
DPW _____	_____
Village Clerk _____	_____

VILLAGE OF FREEPORT	
Date: _____	Permit Number: _____
DPW Final Inspection date: _____	by: _____
Vehicle and Pedestrian Traffic to be protected at all times.	
Tree to be replaced within thirty (30) days from the list of approved trees outlined in §180-42 of the Village Code.	
Property Owner Signature: _____	

I (We) hereby apply for a permit for removal of a tree on public land in accordance with § 180-39 -180 -51 of the Code of the Village of Freeport

1. Name of **Applicant**: _____
(Tree Removal Co.)
2. Address & Phone Number: _____
3. Name of **Property Owner**: _____
4. Address & Phone Number: _____
5. Location of tree: _____
6. Insurance requirements included as part of application per §180-45.

7. The applicant assumes all risk in its performance of all activities authorized by this permit and shall be solely responsible for and shall indemnify and hold harmless the Village and its officers, employees, and agents (the "Indemnified Parties") from and against any and all liabilities, losses, costs, expenses (including, without limitation, attorneys' fees and disbursements) and damages ("Losses"), arising out of or in connection with any acts or omissions of the applicant and/or applicant's Agent, including without limitation, applicant's operations pursuant to this application, regardless of whether taken pursuant to or authorized by this permit and regardless of whether due to negligence, fault, or default, including Losses in connection with any threatened investigation, litigation or other proceeding or preparing a defense to or prosecuting the same.

8. **I have read Village Code § 180-39 through 180-50 and agree to abide by its terms**

I hereby declare under oath that I fully understand and have answered all of the above questions truthfully.

Signature: _____
(Tree Co.)

Signature : _____
(Property Owner)

Sworn to before me this _____ day

Sworn to before me this _____ day

Of _____ 20 _____.

Of _____ 20 _____.

Notary

Notary



INC. VILLAGE OF FREEPORT

HUMAN RESOURCES
46 NORTH OCEAN AVENUE
FREEPORT, NEW YORK 11520
(516) 377-2292 FAX (516) 377-2330
hrhelp@freeportny.gov

ROBERT T. KENNEDY
MAYOR

INSURANCE REQUIREMENTS FOR ALL LICENSED TREE REMOVAL CONTRACTORS

NEED ALL FOUR (4) DOCUMENTS FOR APPROVAL

1. **COMPREHENSIVE GENERAL LIABILITY INSURANCE:**
COMBINED SINGLE LIMIT: Minimum \$1,000,000 per occurrence

The Inc. Village of Freeport MUST be added to the General Liability policy as an additional insured for the entire policy period. This MUST be specified on the Certificate. A copy of the endorsement that adds the Inc. Village of Freeport as additional insured to the General Liability policy must be provided upon demand.

2. **CG2012 ENDORSEMENT** - Liability insurance must specify that it affords coverage for the additional insured for work done by the named insured pursuant to permits taken out through the Inc. Village of Freeport . **Please provide the State and Political Subdivisions--Permits endorsement, #CG2012 or exactly worded equivalent.**
3. **WORKERS' COMPENSATION INSURANCE:** Statutory limits. Evidence of same must be provided on a C-105.2 or a U-26.3 form.
4. **NEW YORK STATE DISABILITY INSURANCE:** Statutory limits. Evidence of same must be provided on a currently dated DB-120.1 form

IF NO EMPLOYEES, you MUST submit a completed form # CE-200 with each and every permit and license for which you apply in lieu of Workers' Compensation Insurance and N.Y.S. Disability Insurance. You obtain these from the Workers' Compensation Board website.

Ten (10) day prior written notice of cancellation or any change in the coverage is required.

Insurance companies providing the required insurance policies must be New York State admitted carriers, have a policyholder's rating of "A" or better, and a Financial Rating of at least "10" or better according to the current Best Insurance Rating Guide.

All Certificates of Insurance confirming the above coverages must be originals and include the licensed tree removers name and be forwarded to: Inc. Village of Freeport, 46 N. Ocean Ave., Freeport, N.Y. 11520, att: Christine Maguire. If any questions about insurance issues ONLY, please call at 516-377-2293.