

City of Kearney
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TREE REMOVAL COST SHARING PROGRAM REQUEST FOR REIMBURSEMENT

Attach a receipt from the business that removed the tree(s) to this form.

Name: _____

Address: _____

City: _____

Phone: _____

Type of Tree Removed: _____

Cost of Tree(s) Removed (tax not included) \$ _____

Permit to remove on file: Yes No

Attach receipt to form.

Office use only:

Amount of Tree Removal \$ _____

Amount of reimbursement (50% of cost up to \$200) \$ _____

Approved by: _____

Date: _____