



Tree Trimmer Application

The undersigned hereby makes application for a Tree Trimmer license in the City of Leavenworth, Kansas under the provisions of the Code of Ordinances, Chapter 12 Businesses, Article X

New \$50.00 Renewal \$50.00

BUSINESS INFORMATION

Business Name: _____
Business Address: _____ City: _____ State: _____ Zip: _____
Business Phone: _____ Email: _____

OWNER/APPLICANT INFORMATION

Owner/Applicant Name: _____
Owner/Applicant Address: _____ City: _____ State: _____ Zip: _____
Owner/Applicant Phone: _____ Email: _____

MAILING ADDRESS

Business Owner/Applicant Other: _____

PUBLIC INFORMATION RELEASE

I give my permission to the City of Leavenworth to release the following information:

Business name Business City & State Business Phone Business Email Website: _____

APPLICATION MUST INCLUDE THE FOLLOWING:

Before a tree trimmer's license shall be issued, the applicant for such license shall file with the city clerk a certificate of liability insurance issued by a company authorized to do business in the state providing \$1,000,000.00 per occurrence for bodily injury or property and \$2,000,000.00 aggregate coverage. The description of operations section shall include the following: "tree trimmer" and "City of Leavenworth its assigned, affiliates and officers are additional insured on a primary and non-contributory basis". The policy shall further include a provision that notice of change or cancellation shall be given to the city.

Office Use Only

_____ Date
_____ Received By
_____ Insurance (requirements met)
_____ Account Number
_____ License Number
_____ Bill Number

By signing, I agree to comply with the City of Leavenworth Ordinance, Rules, or Regulation that govern the license and that all information provided is true and correct. I understand that my insurance must remain up-to-date on file or my license will be suspended until current insurance is received by the City Clerk's office.

Owner/Applicant Signature: _____ Date: _____

TREE TRIMMER LICENSES EXPIRE FEBRUARY 28th OF EACH YEAR

Fees paid are not prorated, refundable or transferable

Office of the City Clerk • City of Leavenworth • 913-682-9201 • 100 N. 5th Street • Leavenworth, Kansas 66048

