# TOWN OF HOLLYWOOD, SC

**TREE PERMIT APPLICATION**

PO BOX 519
HOLLYWOOD, SC 29449
Office: 843-889-3222 Fax: 843-889-3636

---

**TREE CUTTING PERMIT FEE** **$35.00** **DATE PAID** _____

**EXPECTED DATE OF TREE CUTTING:**

| Month | Date | Year |
|---|---|---|
| | | |

**TMS#** _____

**SITE LOCATION:** _____

_____

**PROPERTY OWNER:** _____

**TELEPHONE:** _____

**PERSON APPLYING:** _____

**REASON FOR REQUEST:** _____

_____

_____

_____

_____

_____

_____ _____

Applicant's Signature Date

**SIGNATURE OF APPROVAL**

_____ _____

Planning & Zoning Administrator Date