



VILLAGE OF GOSHEN, NEW YORK

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TREE REMOVAL FORM

I, _____, request the Village of Goshen and Orange and Rockland, or other contractor, to **remove** a dead or dangerous tree on my property located at: _____.

PLEASE CIRCLE ONE:

- A) If tree is determined to be dead or dangerous, I agree to have the Village of Goshen, Orange and Rockland, and/or other contractor to remove the tree or trees from said location.

- B) I request that said tree or trees be left on my property after cutting, which ***I agree to remove within 15 days.***

SIGNED _____ DATE _____

Phone # _____

Email Address _____