

# Vegetation Control Request/Approval Form

Kala Point Owners' Association  
APP XII-3 as Revised August 12, 2014

***Submission Deadline: 15 calendar days before the second Thursday of each month.***

***NOTE: Requests involving Bluff Common Areas shall be submitted to BMAC on the BMAC Request Form.***

**Requester Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Tree location/address if different from Requester address:** \_\_\_\_\_  
**Tree Location Lot #:** \_\_\_\_\_ **Condo/TS #:** \_\_\_\_\_

**Read and ☒ the conditions that apply to your request.**

<input type="checkbox"/> Jefferson County SMP	To determine if your property is affected by the Jefferson County SMP (Shoreline Master Program), contact your sub association Board (e.g., Kala Bluffs Condo Association) and/or the Kala Point General Manager before proceeding with your tree request.
<input type="checkbox"/> Lot Owner	Requests for tree actions on property <b>not owned by you</b> must be accompanied by the written approval of the property owners.
<input type="checkbox"/> Condo or Timeshare	Your request must <b>first be approved</b> by your Association Board, which will then submit your approved request to the KPOA Tree Committee on your behalf.
<input type="checkbox"/> KPOA Common Area	KPOA Common Area requests will be given a minimum automatic 30-day public review for live trees only. See APP XII-2, Section B #8.
<input type="checkbox"/> Trees tagged <input type="checkbox"/> Trees not tagged	Trees shall be color tagged for easy identification, if they are easily accessible. Tags available at KPOA office. If subject vegetation <b>has not been tagged</b> , a photograph or diagram clearly showing the tree and the requested action(s) shall be enclosed with this request.
<input type="checkbox"/> Photos included	Photos of trees are helpful. Please date and number photos. Photos of established views will assist in identifying view maintenance concerns.
Insurance	<b>KPOA Property:</b> Prior to commencement of work on KPOA common area, the contractor shall provide the Association a Certificate of Insurance. The contractor's policy shall provide commercial general liability coverage that includes premises and operations, and products/completed operations with a minimum of \$500,000 per occurrence. KPOA must be included as an additional insured with respect to operations performed on KPOA common area. Requester acknowledges that it is his/her responsibility to require the contractor to be properly licensed and insured and agrees to indemnify, defend and hold Kala Point Owners' Association, its employees and its agents harmless from any and all third party claims arising from the work performed under this request. <b>Other Properties:</b> Although not required for work on individual lots, it is highly recommended that property owner(s) or their agents verify that their contractors are adequately insured

**Describe your request using the Review Criteria below. Attach additional sheet(s), if necessary.**

Tree Species, if known	Tagged/How marked?	Action requested	Review Criteria*

**\*Review Criteria (APP XII-2)** The Tree Committee may consider the following criteria:

a. Maintaining established views b. Impact on neighbors & neighborhood c. Effect on erosion d. Effect on wildlife e. Possible hazard or fire danger	f. Overall health of the tree (age, size, disease, injury) g. Tree location – e.g., to allow sunlight, roof safety h. General appearance of the tree if topped, limbed, feathered, etc	i. Natural or owner planted j. Are there smaller trees to take its place? k. General aesthetics to the community l. Effects on property values m. Satellite reception n. Other
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**Requester:** please read, ☒ appropriate boxes, and sign before submitting this request to the KPOA office.

If I proceed to act under the Tree Committee's approved Vegetation Control Request Form, I understand that KPOA assumes no liability for any action or omission of the Requester, its agents and contractors. I also understand that I must abide by the terms of an approval, including the requirement that all cut vegetation be removed from view or neatly stacked, except on sensitive slope areas.

☐ Jefferson County SMP - I acknowledge that I am responsible for obtaining Jefferson County approval if the requested action is located within the jurisdiction of the Shoreline Master Program (SMP) and where Jefferson County approval is required.

☐ I agree to (1) participate by being present during the Tree Committee site visit; (2); notify the Tree Committee Case Manager at least two working days before starting work, and (3) when work is complete. If the Tree Committee Case Manager is unavailable, I will contact the KPOA Office for help in notifying the proper person.

☐ I agree to contact the KPOA General Manager at least two working days prior to conducting any vegetation control actions on KPOA common area property prior to cutting trees that may drop on KPOA common area property.

☐ For KPOA-related requests, complete the approved work within 6 months from the date of this approval.

☐ For Jefferson County SMP-related requests, complete the approved work within the SMP-designated time frame.

☐ I understand my Case Manager will provide me a signed, completed copy of my request form after the site visit and decision have been made.

**Note:** Your Tree Committee Case Manager and the Tree Committee Chair are available to answer your questions and discuss the Committee's decision. If you have new information that was not available to you at the time of the Committee review, you may request that the Committee reconsider its decision. You may also appeal the Committee's final decision to the KPOA Board of Directors. Refer to APP XII – 2 for procedures and time limits.

**Requester Signature:** \_\_\_\_\_

— FOR TREE COMMITTEE USE ONLY —

**Vegetation Control Request Results for Case Number:** \_\_\_\_\_

**Status:**      ☐ **Approved**                      ☐ **Approved with modifications**                      ☐ **Denied**  
                    ☐ **Approved pending receipt of Jefferson County SMP Permit**

In response to your request and based on the on-site inspection by the Tree Committee:

☐ The Committee did not approve your request as submitted for the following reasons stated below.

☐ The Committee approves your request with the following conditions stated below

**Requestor:** Please initial your acceptance of any conditions.

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Tree Committee Case Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Jefferson County Admin (if req'd): \_\_\_\_\_ Date: \_\_\_\_\_

**CASE COMPLETED.** Form filed with Tree Committee & KPOA on \_\_\_\_\_ by \_\_\_\_\_