

Town of Sullivan's Island

Sullivan's Island, South Carolina

TREE COMMISSION APPLICATION

Sullivari's Island Building Department 2056 Middle Street Phone: [843] 883-5731

Sullivan's Island, South Carolina

FAX: (843) 883-3009

Address of Work	Site: 3109 7	I'on Ave Th	1S#	Zoning:
Owner of Property	: Dan Me	Sino Mailing Add		J'on Aue nomes le quail. com
Signature J	7		if co-owned):	
	124-1629 F	371	mt.P	redar Creek Ct. Jeasant, Sc 29466 Expiration Date: 2025
Tree Category:	Category I	[Trees sixteen (16) inches in diameter (DBH) or over] X		
	☐ Category II	[Trees six (6) to fifteen (15) inches in diameter (DBH)] X		
	☐ Category II	[Sabal Palmetto (Ca	bbage Palm) relo	cation or replacement] X
recant	rre	bh of all trees requested		emove 19" dbh

All trees 16 inches or greater (Category I trees)

All trees 6 inches or greater and all Sabai Palmettos (Category II trees)

Tree survey no more than one year old

Trees requested for removal should be indicated by an "x" on a 11" x 17" site plan (replacement in-kind is required for removal of protected trees: oaks, magnolias, pecan and red cedar trees)

Illustrate protective tree zones for all protected trees; show no proposed construction—driveways, structures utility placement, fill dirt, etc. (provide grading plan to illustrate any proposed grading changes)

All site features should be shown and labeled (driveways, sidewalks, pools w/ decks, walls, and other hardscape elements)

Indicate all utility routes from main source to house connection on plan ensuring that they avoid a litree protection zones.

Pictures, with a Certified Arborist's Letter if tree is dead, in decline or deemed a hazard

The applicant/ permittee shall be responsible for all claims and liabilities arising out of work performed pursuant to the tree removal permit or ansing out of the applicant/ permittee's and his/her agent's failure to perform any of the requirements of the permit. The undersigned hereby agrees to indemnify, defend and hold harmless the Town of Sullivan's Island, its officers, agents, employees and volunteers from any and all liabilities, claims, losses and expense, including attorney's rees and court costs and interest. In any manner caused by, of whatsoever kind of nature, arising out of, or in connection with, this Tree Removal Permit. I have read and understand the rules and regulations as stated above, and confirm that I understand and agree to the terms of this permit application, and that there are no restrictive covenants on the tract or parcel of land for which this permit is being requested (per SC Code §6-29-1145).

Property Owner's Signature: JM

Bate: 9/26/25



Town of Sullivan's Island

Sullivan's Island, South Carolina

TREE REMOVAL REQUEST

Sullivan's Island Building Department Phone: (843) 883-3198 2050-B Middle Street Sullivan's Island, South Carolina	FAX: (843) 883-3009				
Address of Work Site: 3109 Jon Ave TMS#	Zoning:				
Owner of Property: Day Messing Mailing Address: Phone #: (031-767-2843					
Signature:					
Arborist/ Contractor: Gerald J. Benoit Mailing Address: 3300 C. Phone #: 843-224-1629 Fax# Mt. Plea	edar Creek Ct. sent, SC 29466				
Town Business Licen 26-297.0 State License #: Signature: Second J. Benoil	Expiration Date: 2025				
Tree Category:	[DBH) or over]				
Category II [Trees six (6) to fifteen (15) inches in diameter (DBH)]					
Category II [Sabal Palmetto (Cabbage Palm) reloca	tion or replacement]				
Explain scope of work (list species and *Dbh of all trees requested for removal): Remove 1 16"dbh healthy Slash Pine with mitigation					
Submit a scaled site plan (showing TMS#, designer, graphic scale, and date) showing the following information: All trees 16 inches or greater (Category I trees) All trees 6 inches or greater and all Sabal Palmettos(Category II trees) Tree survey no more than one year old Trees requested for removal should be indicated by an "x" on a 11" x 17" site plan (replacement in-kind is required for removal of protected trees; oaks, magnolias, pecan and red cedar trees) Illustrate protective tree zones for all protected trees; show no proposed construction—driveways, structures, utility placement, fill dirt, etc. (provide grading plan to illustrate any proposed grading changes) All site features should be shown and labeled (driveways, sidewalks, pools w/ decks, walls, and other hardscape elements) Indicate all utility routes from main source to house connection on plan ensuring that they avoid all tree protection zones. Thereby certify that I have read and understand the requirements of this permit is being requested (per SC Cade §6-29-1145).					
FOR OFFICE USE ONLY	APPLICATION FEE:				
PERMIT NO.: DATE RECEIVED: RECEIVED BY:	Number of Trees Removed x \$25.00				
COMMENTS:	5Total Application Fee MITIGATION REQUIRED:				
	Tree Replacement Required:				
	Number of 2" Dbh x 10' tall replaced				
ZONING ADMINISTRATOR: APPROVAL DATE:	Tree Fund Mitigation Fee: Dbh* of Trees Removed x \$115.00 S Total Tree Fund Fee Removed				