



Town of Sullivan's Island  
Sullivan's Island, South Carolina  
TREE COMMISSION APPLICATION

Sullivan's Island Building Department  
2056 Middle Street  
Phone: (843) 883-5731  
Sullivan's Island, South Carolina  
FAX: (843) 883-3009  
<https://access.smygov.com/?uid=2562>

|                                                                                                                                                                                                                                                |                                                                                                          |                  |                     |                  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------|---------------------|------------------|--|
| Address of Work Site:                                                                                                                                                                                                                          | 2907 Ion                                                                                                 | TMS#             |                     | Zoning:          |  |
| Owner of Property:                                                                                                                                                                                                                             | Christine Klop                                                                                           | Mailing Address: | 2907 Ion Ave        | SULLIVANS        |  |
| Phone #:                                                                                                                                                                                                                                       |                                                                                                          | Fax #:           |                     | ISLAND           |  |
| Signature:                                                                                                                                                                                                                                     | [Signature]                                                                                              |                  |                     |                  |  |
| Signature (if co-owned):                                                                                                                                                                                                                       |                                                                                                          |                  |                     |                  |  |
| Arborist/ Contractor:                                                                                                                                                                                                                          | ANDRUS TREE                                                                                              | Mailing Address: | 3593 Deer Creek Rd. | MP 29466         |  |
| Phone #:                                                                                                                                                                                                                                       |                                                                                                          | Fax#:            |                     |                  |  |
| Town Business License #:                                                                                                                                                                                                                       | 27-4509                                                                                                  | State License #: | RBV20643            | Expiration Date: |  |
| Signature:                                                                                                                                                                                                                                     | [Signature]                                                                                              |                  |                     |                  |  |
| Tree Category:                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Category I [Trees sixteen (16) inches in diameter (DBH) or over] X 1 |                  |                     |                  |  |
|                                                                                                                                                                                                                                                | <input type="checkbox"/> Category II [Trees six (6) to fifteen (15) inches in diameter (DBH)] X          |                  |                     |                  |  |
|                                                                                                                                                                                                                                                | <input type="checkbox"/> Category II [Sabal Palmetto (Cabbage Palm) relocation or replacement] X         |                  |                     |                  |  |
| Explain scope of work (list species and *Dbh of all trees requested for removal):<br>22.5 in. pine.<br>declining pine with approximately 50% deadwood, including brittle and falling limbs<br>extending over the home and neighboring property |                                                                                                          |                  |                     |                  |  |

Submit a scaled site plan (showing TMS#) identifying 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.
- ☐ 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 arising 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 fees 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: [Signature] Date: 5/5/26