

## 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 1843: 883 3009

TMS# Zoning: Address of Work Site 3109 I'm A Messina Mailing Address: 3109 messinahomes ? 631-767-284 Signature (if co-owned): Signature Arborist/Contractor: Gerald T. Benoit-Mailing Address: 3300 Cedar Creek Mt. Pleasant Phone # 843-224-1629 Fave Expiration Date: 202 State License # [Trees sixteen (16) inches in diameter (DBH) or over] [ Category | Tree Category: ☐ Category II [Trees six (6) to fifteen (15) inches in diameter (DBH)] [Sabal Palmetto (Cabbage Palm) relocation or replacement] ☐ Category II Explain scope of work (list species and \*Dbh of all trees requested for removal): Remove

#### 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  $11" \times 17"$  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 flabilities 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 hamiless 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-

Property Owner's Signature: 2m	)ate:	9/2	26/2	15
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# Gerald J Benoit, ISA and Associate Arborists

"Preserving Lowcountry Live Oaks"
3300 Cedar Creek Court~ Mt Pleasant~ SC~ 29466 ~ (843) 224-1629
seajunkie49@gmail.com

September 25, 2025

Dan Messina Messinahomes1@gmail.com 631-767-2843

### Tree Assessment for 3109 Ion Ave., Sullivan's Island, SC

At your request, we conducted a tree assessment of a 19" dbh Pecan tree located on the front center of the above-mentioned property.

Our findings are as follows:

This tree has one broken lower branch. It has an even spread crown with normal branching characteristics and minimal interior dead branches. There is no sign of chlorosis in it's foliage and it produced a normal amount of pecan nuts. This tree is in fair condition.

Please contact me at 843-224-1629 if you have any questions or concerns.

Respectfully,

Gerald Benoit ISA, PA

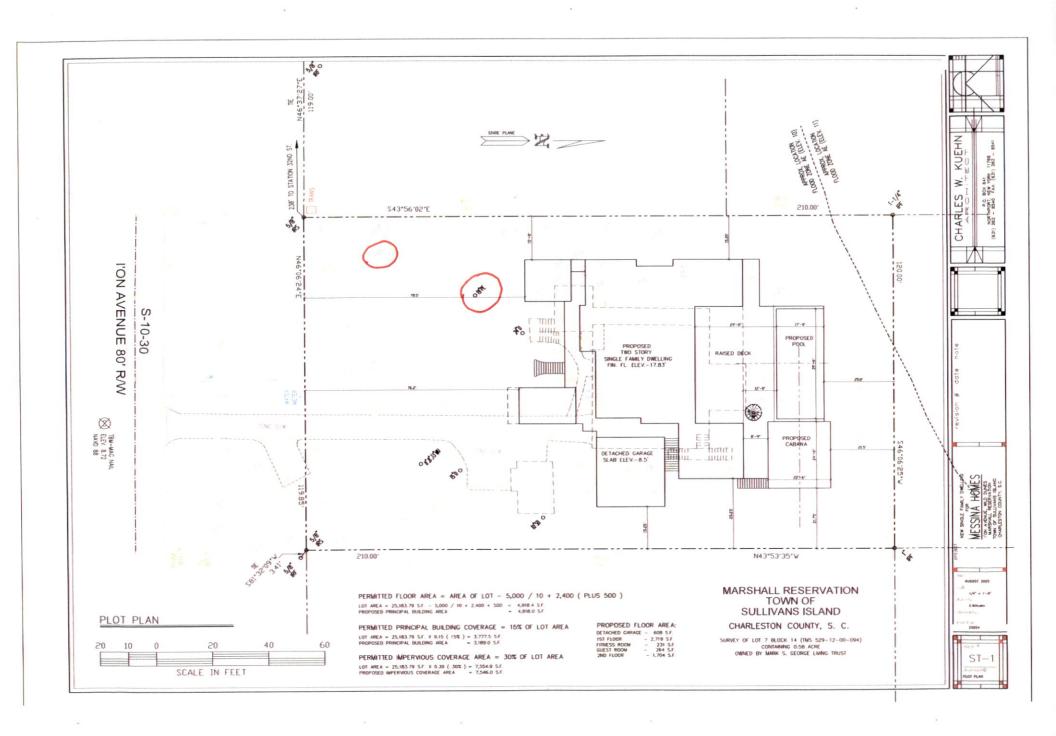
Andrew Hargett ISA Certified Arborist SO-6569A

Tree Risk Assessment Qualified

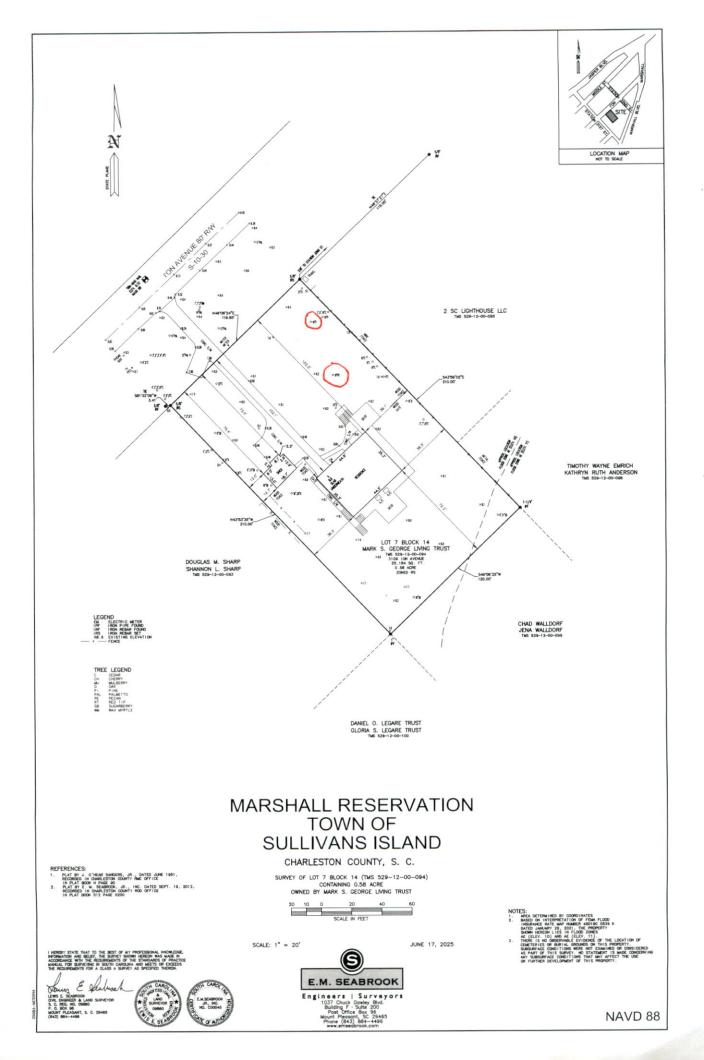
Ispial Harrott

M. Isaiah Abiyyah ISA Certified Arborist KY-0825A

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# Town of Sullivan's Island

Sullivan's Island, South Carolina

### TREE REMOVAL REQUEST

Sullivan's Island Building Department Phone: (843) 883-3198 FAX: (843) 883-3009 2050-B Middle Street Sullivan's Island, South Carolina http://www.sullivansisland-sc.com/ Address of Work Site: 2 TMS# Zoning: Owner of Property: Dan Messing Mailing Address: Phone # (031-767-2843 messinahomes 1 e gmail. Com Signature: Arborist/ Contractor: Gerald T. Benoit Mailing Address: 3300 Cedar Creek Ct. Phone #: 843 - 224-1629 Fax#: Mt. Pleasant, SC 29466 Town Business Licen 26-2970 State License #: Expiration Date: 2025 Signature: Tree Category: Category I [Trees sixteen (16) inches in diameter (DBH) or over] Category II [Trees six (6) to fifteen (15) inches in diameter (DBH)] Category 11 [Sabal Palmetto (Cabbage Palm) relocation or replacement] Explain scope of work (list species and \*Dbh of all trees requested for removal): Remove Slash Pixe 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 removel should be indicated by an "x" on a 11" x 17" site plan (replacement in-kind is required for removal of protected trees: oaks, maunolias, 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. hereby certify that I have read and understand the requirements of this permit, the conditions of approval of this permit, and that there are no restrictive covenants on the tract or parcet of land for which this permit is being requested (per SC Cade \$6.27-1145).

FOR OFFICE USE ONLY	APPLICATION FEE:
PERMIT NO.:DATE RECEIVED:RECEIVED BY:COMMENTS:	Number of Trees Removed x \$25.00  \$Total Application Fee  MITIGATION REQUIRED:
	Dbh* of trees removed
ZONING ADMINISTRATOR: APPROVAL DATE:	Number of 2" Obh x 10" tall replace  If Tree Fund Mitigation Fee: