



**City of Cerritos  
DEPARTMENT OF PUBLIC WORKS  
NO-FEE RESIDENTIAL TREETRIMMING PERMIT**

*For office use only:*  
RTTP #: 2024-\_\_\_\_\_

Date: \_\_\_\_\_

**The homeowner would be financially responsible for any necessary repairs to the public right-of-way resulting from the pay to trim project.**

**NOTICE:** Please print and bring **TWO** copies of this permit to all scheduled inspections.

**Home Owner Information**

Homeowner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Address of Job Site: \_\_\_\_\_  
\_\_\_\_\_

Tree Location & Type: \_\_\_\_\_ Replant: \_\_\_\_\_

**Contractor Information**

Company Name: \_\_\_\_\_

Point of Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Address of Company: \_\_\_\_\_  
\_\_\_\_\_

State License Number: \_\_\_\_\_ Arborist Certificate No: \_\_\_\_\_

City Business License Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
*Business License: (562)916-1236*

Encroachment Permit Needed?  YES  NO  
*Will city street lanes need to be blocked off?*

**AVAILABLE FOR INSPECTION:**

**DATE:** \_\_\_\_\_

**TIME:** \_\_\_\_\_

**PLACE:** \_\_\_\_\_

**PRE-INSPECTION SIGNATURE:** \_\_\_\_\_  
(Parks & Trees Division)

**APPROVAL SIGNATURES:**

Property Owner's Signature: \_\_\_\_\_

Contractor's Signature: \_\_\_\_\_

Parks Superintendent/Arborist Signature/Permit Approval: \_\_\_\_\_  
(Parks & Trees Division)

**PROJECT COMPLETED SIGN-OFF:** \_\_\_\_\_  
(Parks & Trees Division)