



CITY OF FALLS CHURCH

Department of Public Works
City Arborist
Phone: 703.248.5183
300 Park Ave., Ste. 103E
Falls Church, VA 22046-3301

TREE CONTRACTOR LICENSE APPLICATION

PLEASE FILL OUT BOTH SIDES COMPLETELY

BUSINESS INFORMATION

PLEASE PRINT CLEARLY

APPLICATION DATE:

NAME OF BUSINESS:

CONTACT NAME & TITLE:

CONTACT PHONE & EMAIL:

APPLICATION \$25.00 FEE SURETY BOND WORKERS COMP LIABILITY INSURANCE

OWNER/OFFICER

(Name)

(Title)

(Phone)

(email)

(Business Street Address)

(Business City, State, Zip)

BUSINESS PHONE FOR PUBLIC DIRECTORY:

()

WEB PAGE FOR PUBLIC DIRECTORY:

OFFICIAL USE ONLY

\$25.00 FEE PAID: CHECK # _____

MUNIS CUSTOMER # _____ DATE ENTERED: _____

MUNIS CHARGE CODE: CLTC DEPT CODE: 8201

CITY ARBORIST APPROVAL

Charles Prince

(Date)

ISA CERTIFIED ARBORISTS ON STAFF

(Name)

(Certification Number)

(Name)

(Certification Number)

(Name)

(Certification Number)

(Name)

(Certification Number)

(Name)

(Certification Number)

(Name)

(Certification Number)

CITY OF FALLS CHURCH BUSINESS LICENSE #*:

(if your company is not required to have one, put N/A):

*If you need to obtain a City of Falls Church business license, or are unsure if you need one, please contact the Commissioner of Revenue at **703-248-5019** or visit their office at Suite 201W (City Hall)

VIRGINIA CLASS A LICENSE NUMBER (IF APPLICABLE):

I, THE UNDERSIGNED, HEREBY CERTIFY THAT ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature: _____

Print Name: _____

Title: _____

Trade Name of Business: _____

The City of Falls Church is committed to the letter and spirit of the Americans with Disabilities Act. To request a reasonable accommodation for any type of disability call 703 248-5350.

