

Instructions Arborist Verification of Major Pruning for Tree Health

County of Ventura • Resource Management Agency • Planning Division 800 S. Victoria Ave., Ventura, CA 93009 • (805)654-2488 • www.vcrma.org/tree-permits-and-the-tree-protection-ordinance

Oak, sycamore and other trees over a certain size in the non-coastal zone and most trees in the coastal zone are protected by Ventura County and subject to the requirements of the Ventura County Tree Protection Ordinance. Other than minor pruning, the removal, alteration or encroachment into the tree protection zone (TPZ) of a (living or dead) protected tree requires the approval of the Ventura County Planning Division.

Before the Planning Division will approve a request to alter or remove protected trees, a technical evaluation from a qualified arborist must be submitted (in most cases). These technical evaluations can either be in the form of an Arborist Verification or an Arborist Report. An Arborist Verification provides basic, targeted information on a County form. An Arborist Report provides more comprehensive information that adheres to the County's content requirements. For most ministerial tree permits and authorization letters, an Arborist Verification is required. For discretionary tree permits, an Arborist Report is required.

Major Pruning for Tree Health. Major pruning involves pruning limbs or roots that are greater than 20 percent of the tree's girth or pruning that overall will amount to more than 20 percent of the trees canopy or root system. Major pruning is only justified for the health or stability of the tree. In the non-coastal zone, the only required documentation for approval of major pruning is the Arborist Verification, which must include photos and a simple site sketch. An Authorization Letter is issued by the County if approved. In the coastal zone, pruning of tree canopy greater than 20 percent requires a Planned Development Permit (discretionary permit).

Required Content. Arborist Verification's include the completed form (Cover Page and Tree Evaluation) and the following:

- **Photos**. 1 to 4 color photos per affected tree or stand are required. The photos should be taken from different vantage points, clearly illustrate the reason for the request, and help locate the tree relative to nearby landmarks. Prints must be a minimum of 4" x 6." Digital files are requested.
- Site Sketch or Plan. In the case of requests for major pruning of protected trees, a simple site sketch prepared by the arborist must be included with the request.
- Tree Protection Fencing Sketch or Plan. The arborist must indicate on the site sketch any remaining trees that require tree protection fencing, and where that fencing should be located. Verification that tree protection measures were in place throughout the time of construction may be requested by the Planning Division in writing or photographs.

Arborist Qualifications. Arborist Verifications must be prepared by an arborist certified by the International Society of Arboriculture (ISA) or a related professional, such as a landscape architect, with qualifying education, knowledge and experience, as determined by the Planning Director.

Prior to hiring an arborist, it is recommended that the applicant contact the Planning Division to determine the specific type of Arborist Verification required. Arborist Verifications that provide inadequate information will be returned as INCOMPLETE. For more information on the Tree Protection Ordinance including the County's list of protected trees, go to https://www.vcrma.org/tree-permits-and-the-tree-protection-ordinance.



Cover Page

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	STAFF USE	Case #	
	Date Received:	Received By:	
	# of Color Photos Rec'd (1 per tre	e min.) Propo	sed After-the-fact
# of Trees Evaluated	☐ Site Sketch Rec'd (required)	□ Approved □ I	Denied □ No action
Reason for Request			
PROPERTY WHERE WORK WILL BE PE			
Site Address	Parcel (APN) #		
Owner of Property/Easement Where Work wi	Il be Performed		
Phone # () Email			
Mailing Address	City	State	Zip
REQUESTED BY (if different than owner) Name			
Phone # () Email			
Mailing Address	City	State	Zip
Relationship to Owner			
ARBORIST			
Name	Certification # (ISA or rel	ated)	
Phone # () Email			
Mailing Address	City	State	Zip
SIGNATURE			
I am the property or easement owner where the propos on behalf of the owner on all matters related to this req permit. I understand that the opinions of the arborist inspection. This visual record does not include aerial hazards. This Arborist Verification does not substitute for	juest of the Ventura County Planning in this Arborist Verification are ball or subterranean inspections, and	ng Division for a land used solely on visual of therefore may not r	use entitlement or tree records at the time of
Owner Signature	Print Name		
Relationship to Owner (if other than)		Date	

Tree Evaluation

Arborist Verification of Major Pruning for Tree Health

Arborist should complete one evaluation per tree; however if Section B info is the same for a stand of trees, one evaluation may be used for all, with only Section A repeated for the individual trees. Alternate formats for large numbers of trees may be acceptable.

Inspection Date				
Section A	_			
Tree # Tagged	: Y N	Species		
# of Trunks Girt	h	Height	Canopy Spread	
Tree health: A (Excellent) / B (Av	verage) / C (Fai	ir) / D (Poor) / F (Dead/dying)	
Section B				
Tree location: (include distance f	rom a fixed lan	dmark)		
Recommended Health Pr None Remove dead wood/stubs	uning		□ Reduce/remove limb N/S/E/W □ Other	
☐ Structural pruning for stability				
Estimated total number of branch	nes to be prune	ed		
Limb diameter of each	of the above $_$			
Overall, % of the	tree's canopy	recommended fo	r pruning.	
☐ Spread of disease or insects	from this tree is	s a concern.		
Provide an explanation and	recommendation	ons (such as for o	debris disposal)	
Tree Environment Remediation	n (for care of tre	ee)		
□ None□ Irrigate less / more□ Keep water away from tree tro□ Remove Tree Protection Zone			☐ Treat pests ☐ Cable/pin/support ☐ Remove/replace nursery stake ☐ Other	
Other observations				
Arhorist Signature			Date:	