

HO-CHUNK NATION
DEPARTMENT OF NATURAL RESOURCES

HAZARD TREE REQUEST COVER SHEET

PLEASE CHECK EACH ITEM AND INCLUDE THIS WITH YOUR APPLICATION PACKET.

- Completed work request**
- Signed waiver**

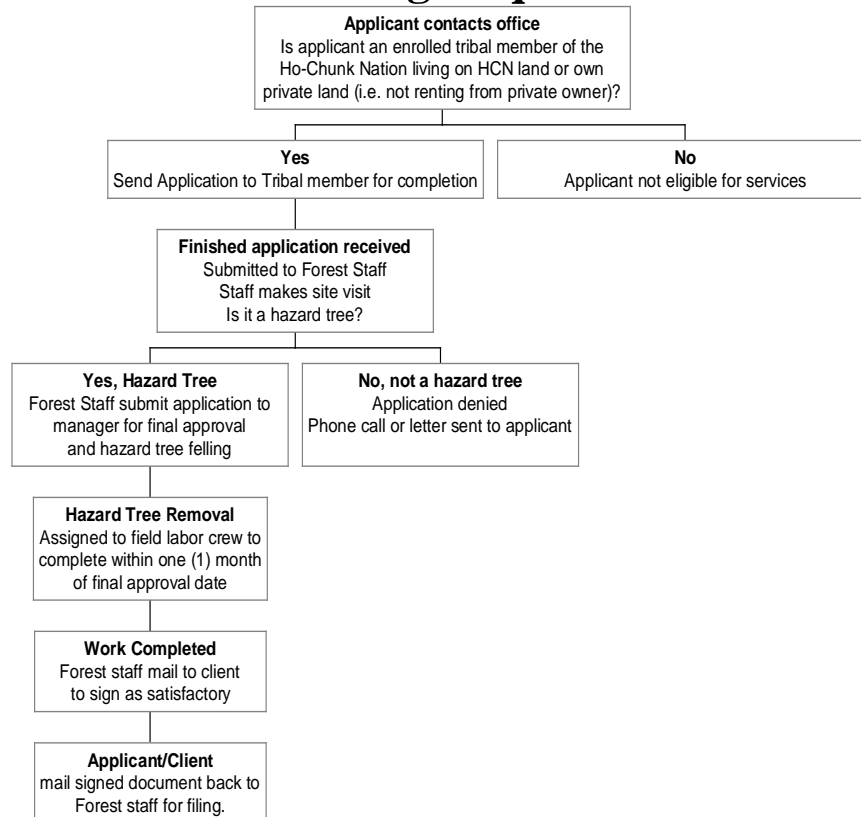
CLIENT RESPONSIBILITIES:

- Shall be an enrolled Ho-Chunk Tribal Member.
- Shall be 18 years of age, and legally competent.
- To submit an application for each request.
- Shall be the permanent/primary homeowner or renter on Ho-Chunk Nation land.

TERMS AND CONDITIONS:

- Work is to be completed by the Ho-Chunk Nation Department of Natural Resources staff.

Hazard Tree Felling Request Process



DNR Exec. Director Final Approval
 Initials Date

PO Box 667, Black River Falls, WI 54615
 (715) 284-2852 * Fax (715) 284-5884

Revised 12/31/18 by SLC



**HO-CHUNK NATION
DEPARTMENT OF NATURAL RESOURCES**

HAZARD TREE WORK REQUEST

A “Hazard Tree” is defined as any tree with a defect or has reached Over-maturity and is within a tree height of a target (i.e. buildings, LP gas tanks, satellite dishes, etc.).

NOTE: All questions on the application must be answered. Incomplete applications shall be returned for completion.

Name: _____ **Date:** _____

Address/Fire Number: _____ **Daytime Phone:** _____

City: _____ **State:** _____ **Zip:** _____

Enrollment #: _____

Specific Directions to proposed Hazard Trees and description (Example: Jack Pine 50 ft. north of house):

Number of hazard trees to be felled _____

- Check box if you would like stump removal. NOTE: HCN DNR will not complete the stump removal. HCN DNR will coordinate with HCN Housing Department to complete this service.**

“HCN DNR can fell hazard trees only if it can be done safely by current staff and within the means of equipment we have available. HCN DNR is not a full tree service and generally does not have means to remove/transport trees once they are felled. Therefore, the applicant will generally be required to keep the felled trees as a source of firewood for themselves or friends and family. HCN DNR may be able to assist in hauling the felled tree away from the site in special circumstances, but in most instances does not have the time, resources, nor dump site to do so.”

I signify that I understand and accept the above statement by providing my initials here: _____
Initials Date

DO NOT SIGN UNTIL AFTER WORK HAS BEEN COMPLETED

I verify that the work has been completed according to the specifications list above and in accordance with the “Hazard Tree Removal Request Waiver.”

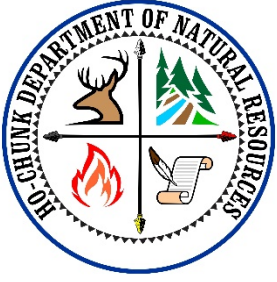
Once work is completed, a copy of this form will be presented on site or mailed to you for your signature.

Signature of Applicant

Date

DNR Exec. Director Final Approval
Initials Date

PO Box 667, Black River Falls, WI 54615
(715) 284-2852 * Fax (715) 284-5884



HO-CHUNK NATION
DEPARTMENT OF NATURAL RESOURCES

HAZARD TREE REMOVAL REQUEST WAIVER

- I certify that the information given by me on this application is true and correct to the best of my knowledge. I understand that false statements will void this application and disqualify me from receiving assistance.
- I hereby request the Ho-Chunk Nation Department of Natural Resources (HCN DNR) to perform the above described work. I am the owner of the aforementioned property or a renter of a home on HCN land and voluntarily and irrevocably hereby waive all rights and claims for death, injury, property damage, and all other losses against the Ho-Chunk Nation, and its officials, employees, and agents, concerning the work performed by the HCN DNR or its agents.
- I understand that the DNR will perform only the felling of hazard tree(s) that I am requesting.
- I understand that the DNR reserves the right to deny this application if staff cannot complete the request safely.
- I understand that all work is subject to funding availability.
- I understand that if approved, the DNR has up to one month from the date the application is approved to complete the tree felling.
- I understand there may be cutting restrictions between April and October in order to prevent the spread of Oak Wilt Disease. I realize these restrictions may delay cutting of my hazard tree to prevent the spread of Oak Wilt Disease.
- I understand that once the tree is felled, the “hazard” that existed has been removed and HCN DNR has therefore completed this request. I will keep the felled tree(s), which includes brush and small branches, for firewood but I am responsible for cutting, splitting, and stacking the firewood.
- I understand that I must sign the work order for the finished work or I will not be eligible for further requests.
- I understand that stump removal is not included as part of this service. If needed, I will request stump removal to the HCN DNR staff prior to the felling of trees. I understand that the HCN DNR will not complete the stump removal and that the HCN DNR will coordinate with the HCN Housing Department to provide this service.
- I understand there is a risk of damage to my lawn during this procedure. HCN DNR staff will aim to avoid or minimize lawn damage. I understand HCN DNR cannot be held liable for lawn damage caused during this procedure.
- I understand there will be some small twigs (approx. less than one inch diameter) remaining after this work is completed and I also understand HCN DNR is not responsible for raking up these small materials.

Signature of Applicant

Date

DNR Exec. Director Final Approval
Initials Date

PO Box 667, Black River Falls, WI 54615
(715) 284-2852 * Fax (715) 284-5884

Revised 12/31/18 by SLC