



CITY OF WEST BURLINGTON

TREE SERVICE LICENSE REQUIREMENT

Permits expire December 31st.

Renewal applications must be submitted to the City Clerk's Office, West Burlington City Hall, 122 Broadway St., West Burlington, IA 52655 prior December 31st.

The following information must be submitted with your completed application:

1. Proof of Insurance – Every person proposing to engage in the tree service business shall present to the City Clerk a certificate of insurance with the City listed as a certificate holder. The following limits are required:
 - \$100,000 for each person injured
 - \$300,000 for each accident
 - \$50,000 for property damage
2. Proof of Workers Compensation - Workers Compensation coverage is required for all employees, including family members.
3. List of employees. Copy of Driver's License or Photo Identification for each employee
4. Copy of Federal Tax ID #
5. \$125.00 License Fee.
6. List of vehicles and copy of their registration. All vehicles should be covered by insurance.



**City of West Burlington
Tree Service Business**

REGISTRATION APPLICATION

City Hall, 122 Broadway St. Ph: (319)752-5451 Fax: (319)752-8425

Each person desiring to engage in the tree service business in the City of West Burlington shall appear each year at the office of the City Clerk to obtain a permit. (City Code Chapter 125). Permits are effective January 1st through December 31st. License Fee is \$125.00 per year.

BUSINESS INFORMATION

Business Name: _____ Federal Tax ID #: _____

Business Address: _____

City/State/Zip: _____

Mailing address if different than business address: _____

Email Address: _____

Applicant Name: _____ Position: _____

Phone: _____

What is the specific nature and type of tree service that will be carried on within the City?

EMPLOYEE INFORMATION

List the full names of all individuals employed. Continue on back if necessary.

Do you have Workers Compensation Insurance to cover these employees? ____ Yes ____ No

If No, explain: _____

BUSINESS TYPE

____ Sole Proprietor ____ Corporation ____ Partnership ____ Sub Contractor

INSURANCE INFORMATION

Proof of Insurance – Every person proposing to engage in the tree service business shall present to the City Clerk a certificate of insurance **with the City listed as a certificate holder**. The following limits are required:

- \$100,000 for each person injured
- \$300,000 for each accident
- \$50,000 for property damage
- Workers Compensation Insurance for employees

Name of Insurance Company: _____

Phone Number of Insurance Company: _____

Expiration Date of Coverage: _____ *(You are responsible for providing an updated proof of insurance if coverage expires during the term of your permit.)*

VEHICLES & EQUIPMENT

List all vehicles used for your Tree Service. Attach a copy of each Vehicles Registration and Proof of Insurance showing all insured vehicles and pieces of equipment.

Vehicles that will be operating under this license:		
Year	Make	License Plate Number

List other equipment used for Tree Service:

APPLICANT SIGNATURE

****Note: (\$125 License Fee, Certificate of Insurance and Certificate of Worker’s Compensation Insurance must accompany this application.)***

Permits are effective from January 1st through December 31st and must be renewed each year.

Applicant Signature

Date