



# TOWNSHIP OF OLD BRIDGE

SHADE TREE COMMISSION  
OFFICE OF THE CONSERVATION OFFICER  
ONE OLD BRIDGE PLAZA  
OLD BRIDGE, NJ 08857  
732-525-5656 OFFICE 732-525-3202 FAX  
[CHESTNUTAFS@OPTONLINE.NET](mailto:CHESTNUTAFS@OPTONLINE.NET)

## Tree Planting Request Form

1. Name \_\_\_\_\_ Date \_\_\_\_\_
2. Address \_\_\_\_\_
3. Home Phone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_ Email \_\_\_\_\_
4. How Many Trees are you requesting? \_\_\_\_\_ (*All requested trees will be planted within the Township easement and not on private property*).
5. Describe exact location to plant requested tree(s):  
\_\_\_\_\_  
\_\_\_\_\_
6. Do you know if a tree was there previously \_\_\_\_ Yes \_\_\_\_ No,
7. And if so is there a stump? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Do not know
8. Underground Utilities? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Do not know
9. Overhead Utilities? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Do not know
10. Do you have a preference on the type of tree? \_\_\_\_ Yes \_\_\_\_ No
11. If yes, describe (Shade tree, Ornamental tree, Flowering etc. )  
\_\_\_\_\_  
\_\_\_\_\_
12. Are you interested in becoming a Shade Tree Commissioner? \_\_\_\_ Yes \_\_\_\_ No,
13. \_\_\_\_ I would like to know what is involved before I answer, so contact me at the above number.
14. If a tree is to be planted, you will be required to care for it such as watering, would you be able to care for it? \_\_\_\_ Yes \_\_\_\_ No

**Note:**

1. *The completed request form should be returned to Old Bridge Township Engineering Office, 1 Old Bridge Plaza, Old Bridge NJ 08857 or emailed to [Engineering@oldbridge.com](mailto:Engineering@oldbridge.com).*
2. *All tree requests will be honored in the order they are received, however this does not guarantee a tree will be planted as the program is solely based on available funding.*