



Wilmington Heritage Tree Program Nomination Form

Please type or print clearly

Category (please \checkmark) Specimen Historical Landmark Grouping

Tree Species Common Name _____

Scientific Name _____

Tree Measurement Data

Describe Location of tree(s) on property

- (1) Circumference at breast height (4.5 ft) _____ inches
- (2) Estimated height _____ feet
- (3) Estimated average crown spread _____ feet
- (4) Approximate age _____ years
- (5) Other characteristics as outstanding specimen tree

Group of Trees Data

- (1) Trunk circumference range _____ inches to _____ inches
- (2) Average crown spread _____ feet
- (3) Approximate area covered _____ acres
- (4) Age range _____ years to _____ years
- (5) Approximate number of trees _____

Special Significance _____

What is the health / condition of the tree(s) _____

Is (are) the tree(s) located on (please \checkmark) **Private** **Public**

Is (are) the tree(s) visible from the street (please \checkmark) **Yes** **No**

Your name/address/contact number is required _____

e-mail address: _____

Phone Number: _____

Owners Signature(s)

By signing this form, I give the Heritage Tree Committee and its representative permission to examine the above tree(s) for consideration in the Herifitage Tree Program and for designation if approved.