



CITY OF LEWISTON COMMERCIAL TREE PRUNER LICENSE PUBLIC RIGHT-OF-WAY

PURPOSE AND DEFINITION

The licensing of all commercial tree pruner's within the City is necessary for the purpose of protecting the citizens and businesses of the City and public right-of-way.

"Commercial tree pruner" means any person engaging in the commercial business, trade or for hire, the cutting, trimming, pruning or removing of trees located within the public right-of-way.

HOW TO APPLY

You may obtain a license application from the Community Development Department. In addition to the commercial tree pruner's license and business license, a Tree/Service/Tree Pruner License is required for each person performing this type of work in the City right-of-way. Applications must be reviewed and approved by the City Forester. You may call the Business License Office at 208-746-7363 to request an application or go to the city website at www.cityoflewiston.org to print one.

TIME FRAME

A license review takes approximately fifteen (15) working days from the time we receive the license application to the time you receive your license. However, in some cases it may take longer, depending upon exam scheduling with the City Forester.

REVIEW PROCESS

When the completed application has been received by the Business License Office, copies are sent to the Fire Department, Building and Zoning Officials, and City Forester.

The Zoning Official reviews the application to determine if the business is allowed in the zone. In some instances, a conditional use permit may be required; if so, approval of the conditional use is required by the Planning and Zoning Commission before a business license may be issued.

The Fire inspection will be arranged through the Lewiston Fire Department and will be scheduled at a time during the normal working day convenient to the applicant. The Fire Department reviews the use and structure for fire and life safety requirements not covered in the Building Code, i.e., water supply, Fire Department access and fire extinguishers.

The Building Official reviews the condition of the structure in relation to the request. The Building Division inspectors review for compliance with adopted codes including electrical, mechanical and building codes. The Building Division also reviews the structure for compliance with the Americans with Disabilities Act (ADA). The Health District and the Police Department may also review some applications.

Following the inspections, you will be given a letter containing the inspectors comments and/or a list of any corrections that may be required. Some corrections may be required immediately, prior to occupancy; others may be completed within a short period of time.

ARBORIST EXAM AND INTERNATIONAL SOCIETY OF ARBORICULTURE CERTIFICATION REQUIRED

At least one (1) employee of the tree pruning business is required to provide proof of successful completion of the Certified Arborist Exam and provide certification by the International Society of Arboriculture and must be physically present at the work site and either perform the pruning work himself/herself, or direct and supervise the pruning work at all times. This certification must be renewed every 3 years and a copy given to the Business Licensing office at the time of business license renewal.



CITY OF LEWISTON COMMERCIAL TREE PRUNER LICENSE

INSURANCE REQUIRED

A certificate of liability and property damage insurance executed by a surety authorized to contract business with the state of Idaho must be provided to the City. The minimum amount of coverage is \$300,000 per occurrence for BI and \$100,000 per occurrence for PD or combined BI/PD \$300,000.

TREE PRUNING AND REMOVAL PERMITS REQUIRED

A permit is required for all work on trees located in the City public right-of-way. There is no charge for the permit and must be obtained prior to start of work at the City Forester Office, 1122 7th St. Any removal of a tree requires inspection prior to removal. Allow one (1) business day for inspection. The City Forester is available in the mornings Monday through Thursday at the Normal Hill Cemetery Office, 1122 7th St, Lewiston, (208) 746-6857.

RIGHT-OF-WAY PERMITS REQUIRED

Any work performed in the City right-of-way requires a right-of-way permit and may be obtained by contacting the Public Works Department, 215 "D" Street, Lewiston, (208) 746-1355.

LICENSE FEE

The license fee is calculated on number of employees. Refer to the Business License Fee Schedule for current rates. License fees are updated annually on October 1.

REFUND POLICY

Withdrawal of Application – If, upon written request by the applicant to the Business Licensing Coordinator to withdraw an application for license, a refund shall be granted, less a processing fee; provided however, that no investigation had been conducted of the business premise or a license issued, in which case a refund shall not be granted.

ALL BUSINESS LICENSES MUST BE RENEWED ANNUALLY

Register your business:	Idaho Secretary of State - (208) 334-2301 - www.sos.idaho.gov PO Box 83720 Boise ID 83720-0080
Federal taxes:	Internal Revenue Service - (800) 829-1040 – www.irs.gov Federal Bldg, Rm 327 550 W Fort St Boise ID 83724-0041
State income and other taxes:	Idaho Tax Commission - (208)799-3491 - www.tax.idaho.gov 1118 "F" Street Lewiston ID 83501
Employment taxes, new hire, labor laws:	Idaho Department of Labor – (208) 799-5000 ext. 3937 or 3855 – www.labor.idaho.gov 1158 Idaho St Lewiston ID 83501
Worker's Compensation Insurance:	Idaho Industrial Commission – (208) 799-5035 – www.iic.idaho.gov 1118 "F" Street Lewiston ID 83501



CITY OF LEWISTON TREE PRUNER COMPANY ADDENDUM

This addendum is required for all tree pruner companies located in or engaged within the corporate city limits of Lewiston who will perform work in the city public right-of way. It must accompany your application for a business license. Submit application and attachments to: City of Lewiston, Business Licensing, 215 "D" St or PO Box 617, Lewiston ID 83501 Questions may be directed to Business Licensing at (208) 746-7363.

This Addendum is for the Business & Address of:	Company Name:	Company Address: <small>Street Number, Direction (N, S, E, W) and Name Suite, Unit, Apt # City, State, Zip Code</small>
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Work will be performed on City public right-of-way

INSURANCE INFORMATION

Insurance Company Name:	Certificate or Policy No.:	Effective Date: _____ Expiration Date: _____
Insurance Agent Name:	Agent Contact Ph. No: ()	Vehicle Liability Insurance Coverage Amt: \$ _____

LIST ALL PERSONS PERFORMING WORK IN RIGHT-OF-WAY

Last Name, First Name, Middle Initial	New or Renewal	City Forester Approved
1.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
5.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
6.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
7.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
8.	New <input type="checkbox"/> Renew <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

INDIVIDUAL TREE PRUNER APPLICATION REQUIRED

A completed Commercial Tree Pruner Application required on all new persons listed above who have not been previously approved by the City Forester in Lewiston. Applications may be obtained at the Business Licensing Office, 215 "D" St. Lewiston, ID 83501. Tele: (208) 746-7363

ARBORIST EXAM AND INTERNATIONAL SOCIETY OF ARBORICULTURE CERTIFICATION REQUIRED

City Forester approval is required for all persons performing working in the city right-of-way. At least one (1) employee of the tree pruning business is required to provide proof of successful completion of the Certified Arborist Exam and provide certification by the International Society of Arboriculture and must be physically present at the work site and either perform the pruning work himself/herself, or direct and supervise the pruning work at all times. City Forester, Normal Hill Cemetery Office, 1122 7th St, Lewiston ID 83501. Tele: (208) 746-6857



CITY OF LEWISTON TREE PRUNER APPLICATION (Individual)

Office Use Only-Do not Write in This Area	
Approval	Date
City Forester _____	_____
Certificates Attached <input type="checkbox"/>	
Exam Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Exam Date _____	

Any person performing cutting, trimming, pruning or removing trees within the city public right-of-way and who has not previously been approved by the Lewiston City Forester must complete this Form. Submit with application for business license to: City of Lewiston, Business Licensing, 215 "D" St, or PO Box 617, Lewiston ID 83501. Questions may be directed to Business Licensing at (208) 746-7363.

COMPANY INFORMATION		
Company Name:	Business Telephone ()	Supervisor Name:
Company Address: Street Number, Direction (N, S, E, W) and Name Suite, Unit, Apt # City, State, Zip Code		
EMPLOYEE INFORMATION		
First Name:	Middle Initial:	Last Name:
Home Address: Street Number, Direction (N, S, E, W) and Name Suite, Unit, Apt # City, State, Zip Code		Home Ph: ()
Position/ Job Title:	How many years experience employed as a tree pruner? _____ years _____ months	
STATEMENT OF QUALIFICATIONS		
Describe your experience as a tree trimmer/pruner: _____ _____ _____		
Describe any formal training. Include dates and courses taken. Attached copies of certificates. _____ _____ _____		
Describe on-the-job-training and skills learned: _____ _____ _____		
I CERTIFY THE INFORMATION IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.		
Signature of Applicant		Date