



State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES

IMPROVED OPTION:

Applications can be completed and submitted online. Visit

www.arborday.org/treecity

Click "Start Your Online Application"

Tree City USA Certification and Recertification Application Packet

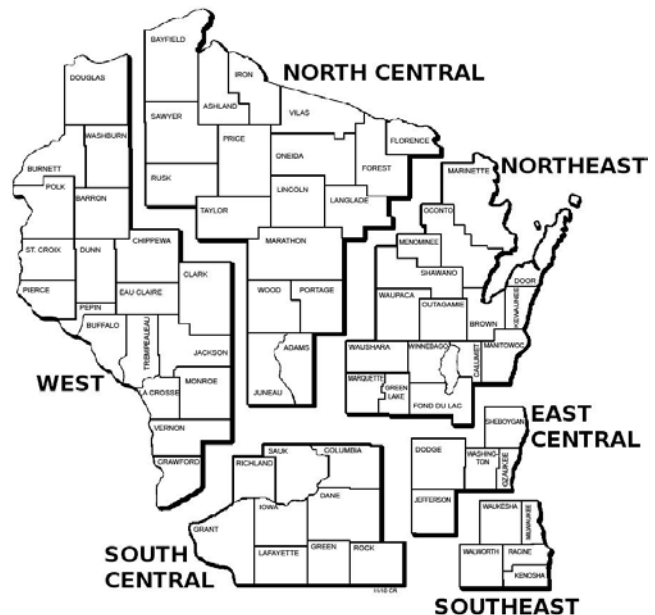
Application Deadline – December 31

Participating in the Tree City USA program represents an important commitment to community tree management. The Wisconsin Department of Natural Resources can provide technical and educational assistance to help you develop a sustainable community forestry program.

This packet contains all required forms for the Arbor Day Foundation's Tree City USA application. It also contains step-by-step instructions and worksheets to report forestry program expenditures and activities.

Alternatively you can skip the paper version and apply online at www.arborday.org/treecity

Please read the enclosed instructions carefully. Incomplete applications cause processing delays and can result in failure of award materials to arrive in time for local Arbor Day observances. Send your completed application including all specified documentation to your regional urban forestry coordinator (see map at right and list below). Please contact your regional urban forestry coordinator with questions.



Wisconsin Regional Urban Forestry Coordinators

West

Brad Johnson
Urban Forestry Coordinator
700 DNR Ave
Spooner, WI 54801
Phone: (715) 635-4175
Fax: (715) 635-4012
Email: BradleyD.Johnson@wisconsin.gov

North Central

Don Kissinger
Urban Forestry Coordinator
5301 Rib Mountain Drive
Wausau, WI 54401
Phone: (715) 359-5793
Fax: (715) 355-5253
Email: Don.Kissinger@wi.gov

Northeast

Tracy Salisbury
Urban Forestry Coordinator
2984 Shawano Ave.
Green Bay, WI 54313
Phone: (920) 662-5450
Fax: (920) 662-5159
Email: Tracy.Salisbury@wi.gov

South Central

Brian Wahl
Urban Forestry Coordinator
3911 Fish Hatchery Road
Fitchburg, WI 53711
Phone: (608) 275-3256
Fax: (608) 275-3338
Email: Brian.Wahl@wi.gov

East Central

Olivia Witthun
Urban Forestry Coordinator
1155 Pilgrim Road
Plymouth, WI 53073
Phone: (920) 892-8756 ext 3044
Fax: (920) 892-6638
Email: Olivia.Witthun@wi.gov

Southeast

Kim Sebastian
Urban Forestry Coordinator
2300 N. Martin Luther King Jr. Dr.
Milwaukee, WI 53212
Phone: (414) 263-8602
Fax: (414) 263-8483
Email: Kim.Sebastian@wi.gov

Application checklist: Remember to address each item below prior to submitting your application.

Note: *The forms in this packet are the only ones you'll need for the Tree City USA application. The ADF has approved this packet in lieu of their standard form.*

- ___ Contact information and signatures
- ___ List of tree board/commission members and meeting dates and/or name of department and person in that department in charge of your community's tree care program
- ___ A copy of your community's tree ordinance only if you are a new applicant or if you are applying for recertification and your ordinance has changed since your last application.
- ___ Tree City USA budget worksheet
- ___ Supporting budget documentation. *If documentation includes non-program costs, forestry expenditures must be clearly identified.*
- ___ Arbor Day observance program/schedule and/or news coverage of event.
- ___ Arbor Day proclamation.

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- ___ Growth Award application and documentation, only if you are applying for a Growth Award, (instructions on page 10). ***Please note that the Growth Award application is a separate application.***

For a Growth Award application: please contact your Regional Urban Forestry Coordinator or go to the ADF website:

Categories listing: <http://www.arboday.org/programs/treeCityUSA/growthAwards.cfm>

Application form: <http://www.arboday.org/programs/treeCityUSA/documents/growth-award.pdf>

TREE CITY USA® APPLICATION

Select one: ☐ First Time Applicant OR ☐ Recertification



TREE CITY USA status is awarded for work completed by the community during the calendar year. Please contact your State Urban Forestry Coordinator for your state's deadline, mailing address and any additional information required by your state. The common deadline is December 31 but can vary by state. Completed applications with attachments can be mailed to your State Urban Forestry Coordinator. To apply online and for additional information, please visit **portal.arborday.org**.

Community Information

Community Name (as it should appear on recognition materials) _____

Community Website _____

Mayor or Equivalent

First Name _____ Last Name _____

Professional Title _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Phone Number (ex. 402-473-9553) _____ Fax Number _____

City Forestry Contact: Person who is responsible for completing and answering questions about this application.

First Name _____ Last Name _____

Professional Title _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Phone Number (ex. 402-473-9553) _____ Fax Number _____

Standard ①: Tree Board or Department

Frequency of Tree Board Meetings: ☐ Weekly ☐ Bi weekly ☐ Monthly ☐ Quarterly ☐ Semiannually ☐ Annually

Chairperson: If your city or town has a Tree Board, list your chairperson or head board member. If your city or town doesn't have a Tree Board, list your city department or manager.

First Name _____ Last Name _____

Professional Title _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Phone Number (ex. 402-473-9553) _____ Fax Number _____

Other Tree Board Members or Staff

First Name _____ Last Name _____

First Name _____ Last Name _____

First Name _____ Last Name _____

First Name _____ Last Name _____

If additional Tree Board members are needed, please attach.

OVER

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Standard ②: A Community Tree Ordinance

Date Current Tree Ordinance was established _____

NEW Applicants (required): ☐ Current ordinance is attached.

RECERTIFICATIONS: ☐ Our ordinance as last submitted is unchanged and still in effect.
☐ Our ordinance has been changed. The new version is attached.

Standard ③: A Community Forestry Program with an Annual Budget of at Least \$2 per capita

Community Population _____

To review program standards and application resources, visit arborday.org/treecity.

Tree Planting and Initial Care\$ _____

Tree Maintenance\$ _____

Tree Removals\$ _____

Management\$ _____

Utility Line Clearance.....\$ _____

Volunteer Time.....\$ _____

Other (please explain) _____ \$ _____

Total Community Forestry Expenditures.....\$ _____

Please attach Annual Work plan (if required by your state) and supporting budget documents.

Trees Planted _____ Trees Pruned _____ Trees Removed _____

Standard ④: Arbor Day Observance and Proclamation

Date of observation _____

Please attach program of activities, photos, and/or news coverage. Attach Arbor Day Proclamation.

Mayor or Equivalent Signature

Title

Date

Application Certification To Be Completed By The State Forester:

Community: _____

The above named community has made formal application to this office. I am pleased to advise you that we reviewed the application and have concluded that, based on the information contained therein, said community is eligible to be certified as a Tree City USA community, having in my opinion met the four standards required for recognition.

State Forester Signature

Title

Date

Mail completed application with requested attachments to your state forester no later than December 31 (unless your state has instituted a different deadline.)

TREE CITY USA® GROWTH AWARD APPLICATION

Mail completed application with requested attachments to your state forester or apply online at portal.arborday.org. Please contact your State Urban Forestry Coordinator for your state's deadline, mailing address and any additional information required by your state. The common deadline is December 31 but can vary by state.



Application Instructions

- Community must have been certified as a Tree City USA last year and submitted a recertification application this year.
- Community must earn 10 points according to Growth Award Eligible Activities – which were new or significantly improved this year.
- Attach documentation for each eligible activity listed below. Appropriate documentation includes narrative descriptions, copies of documents, copies of printed brochures, and newspaper clippings.
- For a list of eligible activities, visit arborday.org/treecity.

Community Name (as it should appear on recognition materials) _____

City Forestry Contact: Person who is responsible for completing and answering questions about this application.

First Name _____ Last Name _____

Professional Title _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Phone Number (ex. 402-473-9553) _____

Activity #	Name of Eligible Activity	# of Points Earned	Describe how activity was achieved
<input type="checkbox"/> Documentation attached			

Activity #	Name of Eligible Activity	# of Points Earned	Describe how activity was achieved
<input type="checkbox"/> Documentation attached			

➔ Total Points (including points from reverse side): _____

Additional spaces on back if needed.

Mayor or Equivalent Signature

Title

Date

Growth Award Application Certification To Be Completed By The State Forester:

Community: _____

The above named community has made formal application to this office. I am pleased to advise you that we reviewed the application and have concluded that, based on the information contained herein, said community is eligible to receive the Tree City USA Growth Award, having in my opinion met the Growth Award criteria specified in this application.

State Forester Signature

Title

Date



Activity #	Name of Eligible Activity	# of Points Earned	Describe how activity was achieved
<input type="checkbox"/> Documentation attached			

Activity #	Name of Eligible Activity	# of Points Earned	Describe how activity was achieved
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