

## Application Checklist

Signed checklist needs to be submitted with all required documentation at the time of application submission. Your signature is your acknowledgment that if any required information is missing, your application will be denied. All items are **required** unless otherwise noted.

- \$25.00 Annual Application Fee
- Copy of 2022 arborist license from the cities of Aurora, Denver, or Lakewood
- Copy of Current Insurance

Here are the insurance requirements that the City of Wheat Ridge requires:

- Liability requirements - \$250,000 each person
- Liability requirements for two or more persons - \$1,000,000.00
- Small tree license - \$600,000.00
- Property damage requirements - \$100,000.00

- Copy of 2022 Business License with City of Wheat Ridge
- \$10.00 Administrative Fee for processing

***(Only applies to new applications and renewals submitted after January 31, 2022)***

### Only if applying for Arboriculture or Spraying License:

- Copy of State of Colorado Pesticide Applicators License  
*(Each certified person needs a copy on file)*

### If applicable – each certified person needs a copy on file:

- Copy of ISA Certified Arborist License
- Copy of ISA Certified Tree Work Certification

I hereby certify that the application paperwork that I am submitting is complete with the understanding that the 2022 Arborist License with the City of Wheat Ridge will be denied if any documentation is missing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Mail all required documents to the following address:

City of Wheat Ridge  
Parks, Forestry & Open Space  
9110 W. 44th Avenue  
Wheat Ridge, CO 80033



Arborist License Application

City of Wheat Ridge Parks, Forestry & Open Space

9110 W. 44th Ave. Wheat Ridge, CO 80033-3005

P: 303.205.7552

Please check appropriate box:

- New Application  Renewal Application

Note: All licenses must be postmarked by January 31st. Any application after that date will be subject to a \$10.00 administrative fee.

Company Name: \_\_\_\_\_
DBA (if applicable): \_\_\_\_\_
Business Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Mailing Address (if different than above): \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Business Phone: \_\_\_\_\_
Business Email: \_\_\_\_\_
Company Website: \_\_\_\_\_
Main Contact: \_\_\_\_\_
Contact Phone (if different than above): \_\_\_\_\_
Contact Email: \_\_\_\_\_

Please check box for license applying for:

- Spray\* - Apply pesticides to trees, plants, and turf only
 Large Tree - Pruning with aerial device and/or rope and saddle
 Ornamental Plant - Pruning without leaving the ground
 Stump Removal
 Planting
 Arboriculture\* - Perform pruning (large & ornamental), stump removal, planting, and apply pesticides to plants, trees, or turf

\*In order to spray within the city limits of Wheat Ridge, you must be licensed by the State of Colorado, Department of Agriculture.

Please list all State Certified Pesticide Applicators, attach second sheet if necessary.

Certified Applicator's Name: \_\_\_\_\_
Pesticide License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
Certified Applicator's Name: \_\_\_\_\_
Pesticide License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
Certified Applicator's Name: \_\_\_\_\_
Pesticide License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
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Arborist License Application

City of Wheat Ridge Parks, Forestry & Open Space

9110 W. 44th Ave. Wheat Ridge, CO 80033-3005

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Please list all certified International Society of Arboriculture Arborist, if applicable. Attach second sheet if necessary.

Certified Arborist Name: \_\_\_\_\_
ISA Arborist Certification Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
Certified Arborist Name: \_\_\_\_\_
ISA Arborist Certification Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
Certified Arborist Name: \_\_\_\_\_
ISA Arborist Certification Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Please list all certified International Society of Arboriculture Certified Tree Workers, if applicable. Attach second sheet if necessary.

Certified Tree Worker Name: \_\_\_\_\_
ISA Certified Tree Worker Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
Certified Tree Worker Name: \_\_\_\_\_
ISA Certified Tree Worker Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
Certified Tree Worker Name: \_\_\_\_\_
ISA Certified Tree Worker Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I certify that my statements in this application are true, complete, and correct to the best of my knowledge. I understand that our business is required to have knowledge of Wheat Ridge City Code Chapter 24 and related Rules and Regulations set by the Arborist Board and pass the knowledge to our employees. In addition, understand work on and use of the public right of way may fall under other city codes and fees and will work within the rules and regulations established by Wheat Ridge Public Works and the Colorado Department of Transportation. I understand that noncompliance with City adopted codes my result in license revocation and possible fines.

Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only

Date Application Received: \_\_\_\_\_
Application Fee Received: [ ] Yes [ ] No Amount Received: \_\_\_\_\_
Payment Method: [ ] Cash [ ] Check - Check #: \_\_\_\_\_

Insurance Types and Expiration Dates:
[ ] General Liability Expiration Date: \_\_\_\_\_
[ ] Automobile Liability Expiration Date: \_\_\_\_\_
[ ] Workers Compensation Expiration Date: \_\_\_\_\_

Issued License #: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Mailed Date: \_\_\_\_\_