



TOWNSHIP OF WEST ORANGE
Department of Public Works - Shade Tree Division
25 Lakeside Avenue
West Orange, NJ 07052
Phone/Fax: (973) 325-4169
westorange.org

PERMIT #: _____
DATE ISSD: _____
FEE: _____

TREE REMOVAL and REPLACEMENT PERMIT APPLICATION

PROPERTY ADDRESS: 525 Northfield Avenue

DATE: 02/26/2026

Property Owner Information:

Name: By Gomes Northfield, LLC

Phone: 973-695-2700

E-mail: Pedro@GomesGroupLLC.com

Mailing address if other than above:

91 Kossuth Street

Newark, NJ 07105

Applicant Information (if not the owner or tree contractor):

Name: 525 Northfield Ave., LLC

Phone: 973-695-2700

E-mail: Pedro@GomesGroupLLC.com

Relationship: related entity

ALL TREES MUST BE MARKED FOR INSPECTION

Location of tree(s):

See Site Plan Sheets C-100 & SLP-1

☒ This tree(s) removal is part of a project or application involving the West Orange Zoning or Planning Board.

**** If checked for yes, the Tree Removal Checklist must be completed and replanting plan guide adhered to. ****

Number of trees: C-100 Species: See Site Plan page C-100 Diameter of each: See Site Plan page C-100

Reason for removal: construction of building and/site improvements. See sheet C-600 for replanting and plant list

☒ I would like to meet with the Forester when he comes out. (Our office will contact you to set an appointment.)

For office use only:

Number of trees approved for removal:

Non-viable Viable

Number of trees to be replaced: _____

Permit: Approved Denied

Signature of Forester: _____ Date: _____

Tree removal contractor info:

CONTRACTOR: TBD

ADDRESS: _____

PHONE: _____

E-MAIL: _____

Kindly complete and return to forester@westorange.org or submit via fax or street address above.

This application is made with reference to comply with TOWNSHIP ORDINANCE 28-1-11. ALL REPLANTING REQUIREMENTS MUST BE STRICTLY ADHERED TO. Initial: AF