

# TREE LINE USA<sup>®</sup> APPLICATION

Select one:  First Time Applicant OR  Recertification



Mail completed application with requested attachments to your State Forester no later than December 1. The Tree Line USA Award is made in recognition of work completed by the utility during the calendar year. Provide information only for the current year. Be sure application fee (made out to Arbor Day Foundation) is included. (First year fee is \$150. Recertification fee is \$75.)

As \_\_\_\_\_ of \_\_\_\_\_,  
(Title) (Name of utility as it should appear on recognition materials)

I herewith apply for official recognition as a TREE LINE USA Utility for \_\_\_\_\_, having met the requirements set forth by the Arbor Day Foundation as noted below: (Year)

## Requirement 1: Quality Tree Care

A. Utility Pruning: Work practices are formally adopted for line clearance tree pruning that are consistent with current ANSI A300 Part 1 and as explained in ISA Utility Pruning Best Management Practices.

**Attach Evidence:** Indicate resource(s) utilized: \_\_\_\_\_

B. Integrated Vegetation Management (IVM): Work practices are formally adopted for management of right-of-way vegetation that are consistent with current ANSI A300 Part 7 and as explained in ISA Integrated Vegetation Management Best Management Practices.

**Attach Evidence:** Indicate resource(s) utilized: \_\_\_\_\_

C. Underground Utility Construction: Work practices are recommended for utility trenching and tunneling construction activities near trees, similar to methods described in Trees and Development, a publication from the International Society of Arboriculture (ISA).

**Attach Evidence:** Indicate resource(s) utilized: \_\_\_\_\_

D. Compliance: The utility's vegetation management standards and work practices comply with all federal, state and local tree care statutes, regulations and ordinances.

**Attach Evidence:** Name of compliance manager or equivalent: \_\_\_\_\_

E. Quality Assurance: The utility has a quality control program and quality assurance process in place to confirm that the vegetation management work is completed in a manner consistent with the provisions for Quality Tree Care, items 1A & B above.

**Attach Evidence:** Summary of quality assurance program and name and title of manager or equivalent

F. Impact on the Urban Forest: The utility vegetation management program includes collaboration with other urban forest advocates and strives to enhance the positive impact of its vegetation management program on both the natural and urban forests.

**Attach Evidence:** Summary of actions and efforts that support the utility's positive impact on the urban forest (i.e. letters of collaboration from municipalities or nonprofit tree planting groups, samples of print material highlighting steps taken by the utility)

## Requirement 2: Annual Worker Training

A. Employees, contractor workers and supervisors who perform pruning and right-of-way vegetation maintenance work for the utility complete annual formal training.

**Attach Evidence:** Training summary, including dates and topics

B. The utility ensures that training takes place and maintains documentation.

**Attach Evidence:** Name of utility designee responsible for documentation and name & title of party responsible for field compliance



**Requirement 3: Community Tree Planting and Public Education**

A. The utility allocates an annual expenditure of at least 10 cents per customer for use in community tree-planting programs throughout the service area.

**Attach Evidence:** Summary of tree planting events/program with sample material and/or photos; Include expenditures on expenditure worksheet

B. The utility makes annual contact with all homeowners and customers for the purpose of providing educational information regarding tree-related utility issues.

**Attach Evidence:** Samples of print material, summary of public education events/trainings/programs with dates; Include expenditures on expenditure worksheet

**Requirement 4: Tree-based Energy Conservation Program**

The utility has a tree-based energy conservation program that makes special consideration of the benefits of trees in energy conservation.

**Attach Evidence:** Summary of tree-based energy conservation program; Include expenditures on expenditure worksheet

**Requirement 5: Arbor Day Observance**

Annual Arbor Day events are sponsored by or participated in by the utility. Utilities are encouraged to collaborate with other urban forest advocates, such as a municipality, school or community tree-planting group to promote Arbor Day events.

**Attach Evidence:** Summary of Arbor Day observance with documentation

**To be completed by person submitting the application:**

Signature \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Date \_\_\_\_\_





## Chief Executive Officer

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Fax Number \_\_\_\_\_

## Public Relations/Information Contact

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Fax Number \_\_\_\_\_

## Utility Forestry/Vegetation Management Contact

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Fax Number \_\_\_\_\_

### Certification (To Be Completed by the State Forester)

Utility

The above named utility 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 utility is eligible to be recognized and designated as a TREE LINE USA Utility, for the \_\_\_\_\_ calendar year, having in my opinion met the five requirements for protection and enhancement of community trees. The \$150 first year or \$75 subsequent year application fee is enclosed.

Signature of State Forester

Person in State Forester's Office who should receive recognition material:

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

### Tree Line USA Expenditure Worksheet

Community Tree Planting Expenditures: \_\_\_\_\_

Public Education Expenditures: \_\_\_\_\_

Tree-based Energy Conservation Program Expenditures: + \_\_\_\_\_

Total Expenditures = \_\_\_\_\_

Divided by total number of utility customers: ÷ \_\_\_\_\_

Must be equal to or greater than 10 cents/customer = \_\_\_\_\_

My utility is exempted as a transmission or hybrid utility. (See Standard 3A)