


APPLICATION FOR FINANCIAL ASSISTANCE FOR THE TREATMENT OF PRIVATE ASH TREES ON PROPERTIES WITH 10 OR MORE ASH TREES

SECTION A IDENTIFICATION OF APPLICANT AND ELIGIBILITY FOR THE PROGRAM

First and last name:	Address and Postal Code:
Email:	Phone Number:
Number of ash trees on the property:	
Number of ash trees treated with TreeAzin this year:	
Diameter(s) of treated ash tree(s) (in centimetres):	
Number of ash trees cut down this year:	
Permit No.: _____	
Background (Policy on the replacement and treatment of private ash trees)	
Have you benefitted from the program in the past (distribution of trees or financial assistance?) (if the answer is "No", go to section B)	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when: _____ If yes, what program (you can check both): Financial assistance <input type="checkbox"/> Tree distribution <input type="checkbox"/> Number of trees received this year: _____ Number of trees received since the start of the program: _____

SECTION B SKETCH TO BE COMPLETED


 Civic number: _____

STREET NAME : _____

Example

F^T
(30cm)

F
20cm

F
25cm

F
30cm

F^T
(20cm)


F
50cm

F^T
(45cm)

F
20cm

F
40cm

F^X
(35cm)


 Civic number: _____

STREET NAME : _____

Legend

F
30cm
Ash (all the ash trees)
+ diameters (cm)

F^T
(45cm)
Treated ash tree this year
+ diameters (cm)

F^X
(35cm)
Ash tree to be cut down this year
+ diameters (cm)

Section C Documents to be attached

<input checked="" type="checkbox"/> Original invoice for a TreeAzin treatment carried out between June 15 and August 31 st of this year (the diameter of the trees must appear on the invoice).
<input checked="" type="checkbox"/> Proof that the applicant is the property owner (example: tax bill).
<input checked="" type="checkbox"/> Photo of each treated ash tree

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SECTION D	SIGNATURE
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I hereby declare that the information provided herein is complete and accurate. I understand that a visit of the site could be carried out in order to validate this information.
I have taken note of the Policy and eligibility criteria.

PROPERTY OWNER'S SIGNATURE (required)

DATE:

To be sent to: **MANAGEMENT – TECHNICAL SERVICES AND PUBLIC WORKS**, 190 Charbonneau Street
Email: travauxpublics@ville.rosemere.qc.ca
Tel.: 450 621-3500, ext. 3300 or 3305 Fax: 450 621-9365

Received by:

Date:

Time:

: _____

SPACE RESERVED FOR THE ECO-CONSULTANT –

ELIGIBILITY CALCULATIONS:

NO. OF ASH TREES TREATED THIS YEAR: _____ X 100%; 50%; 40% = _____ ASH TREES ELIGIBLE X \$100 = _____ ELIGIBLE GRANT
(1=100; 2 à 10 = 50%; 11 AND MORE = 40%, TO A MAXIMUM OF 5.)

NO. OF ASH TREES CUT DOWN THIS YEAR: _____ X 100%; 50%; 40% = _____ ASH TREES ELIGIBLE FOR REPLACEMENT. TO BE DELIVERED SOON.
(1=100; 2 à 10 = 50%; 11 AND MORE = 40%, TO A MAXIMUM OF 5.)

DETAILED INVOICE TREATMENT DATE: _____ COMPANY: _____ PRICE PER CM: _____

PROOF OF OWNERSHIP

IF SOME DOCUMENTS ARE MISSING OR IF THE YARD IS NOT ACCESSIBLE, THE APPLICATION COULD BE DENIED.

APPLICATION ACCEPTED **APPLICATION DENIED**

REASON: _____

POLICY'S ELIGIBILITY CRITERIA:

A person can apply for both programs. However, the combined number of ash trees treated with a grant or replaced cannot exceed 5 per year.

Financial assistance program for the treatment of private ash trees:

The owner of a property with **at least 10 ash trees with a minimum diameter of 20 cm** at a height of 1.4 from the ground, can request a grant in the amount of \$100 per ash tree on the property treated with TreeAzin, to a maximum of 5 grants per homeowner, subject to the program's specifications and compliance with criteria set forth in the policy.

Eligibility for the financial assistance program:

-The application must be completed by the property owner using the form provided for this purpose and must be accompanied by the original invoice for the treatment (showing the diameters of the treated trees, in cm), as well as proof that the applicant is the owner of the property on which the treated ash tree is located.

-Treated ash trees must have a diameter of 20 cm measured at 1.4 m from the ground.

-The percentage of dead branches on the tree must be under 30%.

-The product used to treat the tree must be TreeAzin.

-The arboricultural firm carrying out the treatment must be registered with the Town of Rosemère, accredited by the manufacturer of the product used, as well as hold a permit or certificate issued under the *Pesticides Act*.

-The treatment must have been carried out between June 15 and August 31st of this year.

The Town reserves the right to ask for proof of the number of ash trees located on the applicant's property or to verify it by a visit. It also reserves the right to visit the property to ensure that the work has been carried out.

Number of \$100 grants awarded based on the number of treated ash trees:

-For a single treated ash tree, a single \$100 grant.

-For 2 to 10 ash trees treated, 50% of the treated ash trees receive a grant. In the case of an odd number of trees, the number will be adjusted upward.

-For 11 or more treated ash trees, 40% of the treated ash trees receive a grant. In the case of an odd number of trees, the number will be adjusted upward.

All in all, the treatment of a maximum of 5 trees per property will receive a grant. A grant application can only be made once per eligible ash tree, for life.