



**CITY OF FLORISSANT**  
**RESIDENTIAL TREE SERVICE PROGRAM APPLICATION**  
**HOUSEHOLD INFORMATION**



Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email \_\_\_\_\_

Please check each category below that applies to a member of your household:

U.S. Citizen \_\_\_\_\_ Legalized Alien \_\_\_\_\_ Illegal Alien \_\_\_\_\_

Disabled \_\_\_\_\_ Vietnam Era Veteran \_\_\_\_\_ Disabled Veteran \_\_\_\_\_

List all household members living at your address, including yourself:

**FAILURE TO INCLUDE A HOUSEHOLD MEMBER  
WILL RESULT IN A DECLARATION OF INELIGIBILITY FOR THE PROGRAM**

Name (First, Middle, Last)	Social Security #	Age	Relationship to Applicant	Gender	Race/ Ethnicity
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Age of Home or Year built: \_\_\_\_\_

Is your home located in a floodplain? \_\_\_\_\_

Is your home located near a major highway, roadway, railroad or airfield? \_\_\_\_\_

Is your home located near hazardous operations, a dump, landfill, or industrial site? \_\_\_\_\_



# CITY OF FLORISSANT RESIDENTIAL TREE SERVICE PROGRAM APPLICATION



Do you have any past or pending bankruptcy? \_\_\_\_\_

Are the real estate taxes on this property paid to date/current? \_\_\_\_\_

Are there any federal, state or local tax liens on the property? \_\_\_\_\_

Are all loans (i.e. first mortgage, second mortgage, home equity, etc.) that are secured by this real property paid to date/current? \_\_\_\_\_

How did you find out about the program? \_\_\_\_\_

Are you a first-time participant in the program? \_\_\_\_\_

When is the best time to contact you? \_\_\_\_\_

Please describe the hazard posed by the tree you are applying for assistance for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe the location of the tree on your property:

\_\_\_\_\_

If your application is preliminarily approved, do you give permission for the city's contracted tree service provider to visit your property during daytime hours to provide the Community Development Department with a site-specific assessment? (circle one): Yes or No

Would you like your contact information provided directly to the tree service provider for scheduling and communication purposes? (circle one): Yes or No

The City of Florissant shall ensure that decisions affecting applicants to the Residential Tree Service Program are made without regard to their race, color, religion, sex, national origin, age, disability, or any other protected status.

The undersigned declare that the information which has been given is true and complete to the best of their knowledge.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Address Date

\_\_\_\_\_  
Co- Applicant's signature

\_\_\_\_\_  
Address Date

\_\_\_\_\_  
Community Development Director

\_\_\_\_\_  
Date



# CITY OF FLORISSANT RESIDENTIAL TREE SERVICE PROGRAM APPLICATION



## DECLARATION

The undersigned acknowledge that participation in the Residential Tree Service Program is voluntary.

The undersigned hereby apply for participation in the Residential Tree Service Program as administered by the City of Florissant and agree to provide the City with the information requested on the Household Information Form and all other information requested by the City.

The undersigned hereby understands that the program assistance may not cover full cost of tree related hazard abatement.

The undersigned further agree to comply with all program conditions, including, but not limited to, compliance with all applicable federal, state, county and/or city requirements pursuant to the Housing and Community Development Act of 1974, as amended.

The undersigned hereby authorize the City to obtain the documents necessary for participation in the Residential Tree Service Program, including title information, income verification, etc.

The undersigned affirm and acknowledge that any misrepresentation of material facts or the failure to produce any requested information may result in a declaration of non-eligibility or a termination of continued participation in the program and a consequent denial of any and all benefits.

The undersigned further represent and warrant that the information that has been given is true and complete to the best of their knowledge.

The City of Florissant shall ensure that decisions affecting applicants to the Residential Tree Service Program are made without regard to their race, color, religion, sex, national origin, age, disability, or any other protected status.

The undersigned further affirm and acknowledge that they have been notified of and understand their rights and responsibilities as applicant/s for the Residential Tree Service Program.

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Homeowner's Printed Name

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Address

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Homeowner's Signature

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Date

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Homeowner's Printed Name

---

Address

---

Homeowner's Signature

---

Date

---

City of Florissant Representative

---

Date



**CITY OF FLORISSANT**  
**RESIDENTIAL TREE SERVICE PROGRAM APPLICATION**  
**RELEASE**



This release is made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2021 by and between \_\_\_\_\_, hereinafter referred to as “the Owner” of the property located at \_\_\_\_\_, and the City of Florissant (hereinafter referred to as “the City”).

In consideration of the Owner’s voluntary participation in the City’s Residential Tree Service Program, the Owner hereby releases and agrees to indemnify and hold harmless the City, its agents, employees, contracted service providers and officers from all claims, damages or causes of action (including reasonable attorney’s fees) caused by or arising in any manner from the Owner’s participation in the City’s Residential Tree Service Program.

I/We, the Owner/Owners, have read and understand this release. I/We execute it voluntarily and with full knowledge of its significance the day and year written above.

\_\_\_\_\_  
**Homeowner’s Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Homeowner’s Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Community Development Director**

\_\_\_\_\_  
**Date**



# CITY OF FLORISSANT

## RESIDENTIAL TREE SERVICE PROGRAM APPLICATION



### CHECKLIST

A complete application is required to be considered for eligibility. Please gather the following documentation to satisfy this completeness requirement. We do not want originals. Please make copies prior to submission. Applications will not be returned to you after they are collected.

Your complete application needs to include:

#### Completed & Signed Application Forms (included in this packet)

- Program Overview Signature Page
- Household Information
- Declaration
- Release
- Checklist (this page)

#### 2020 Income Documentation

- Copies of the most recent filed **federal income tax returns for all household members 18 years old or over** (including schedules and attachments) or IRS Letter 1722
- Copies of all supporting tax documentation such as W-2's, Social Security received, Interest and/or Dividend statements (1099s required), Pension statement, Annuities  
**HINT: All the documents that gave you the numbers to put into your taxes.**
- If no taxes were filed, a Verification of Non-Filing will be required. **For this, see the attached IRS tax form.** Fill it out and make a copy. Submit the copy in your application and mail the original to the IRS office indicated. Upon receipt of your Verification of Non-Filing letter, provide a copy to the Community Development Office.
- If anyone in the household is 18 years old or over, is a fulltime student, please submit proof of enrollment.
- Documentation of any child support or alimony received.



# CITY OF FLORISSANT RESIDENTIAL TREE SERVICE PROGRAM APPLICATION



## Homeownership & Occupant Documentation

- Proof of ownership of your home. Examples: General Warranty Deed, Special Warranty Deed or Quit Claim Deed. **A Deed of Trust is not acceptable.** If the name of a deceased person appears on the deed, a death certificate is required. *A copy of the Deed can be obtained in person at the St. Louis County Recorder of Deeds at 41 South Central 4<sup>th</sup> floor, Clayton, MO 63105.*
- Copy of Driver's License for all individuals residing in the home who have one.
- Copy of Social Security cards for all household members including children
- Copy of most recent paid real estate property tax receipt. Can be obtained here: <https://revenue.stlouisco.com/ias/>
- Proof of paid homeowners insurance policy including: policy dates, insured address & proof that it is paid.
- Copy of most recent loan statement(s) i.e. first mortgage, second mortgage, home equity, etc.

THE ABOVE DOCUMENTS MUST BE INCLUDED WITH THIS APPLICATION. (IF APPLICABLE) FAILURE TO SUBMIT REQUIRED DOCUMENTATION MAY RESULT IN A DECLARATION OF INELIGIBILITY FOR THE PROGRAM. ALL DOCUMENTS SUBMITTED BECOME THE PROPERTY OF THE CITY OF FLORISSANT COMMUNITY DEVELOPMENT OFFICE.

**Falsification of any of the aforementioned documents will result in elimination from the program.**

**The undersigned Applicant hereby represents that they have read and understand the program guidelines.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date



# CITY OF FLORISSANT

## RESIDENTIAL TREE SERVICE PROGRAM APPLICATION

### APPLICATION DOCUMENT FAQ'S



These are some general answers to commonly asked questions about the application process to help you get started. We understand every situation is unique, please do not hesitate to call our office at 314-839-7680 for further information.

**Q: Someone in my household is 18 years old or over but is a full-time student. Do I still need to include their information?**

**A:** Yes, all the same tax and income documentation is required. However, their full-time status is considered towards the household's income eligibility. To document fulltime status, please include a fulltime enrollment status letter or copy of their schedule with their name listed for either the Spring or Fall Semester.

**Q: Someone in my household is 18 years old or over but doesn't file taxes. What do we submit for them?**

**A:** We will need Verification of Non-Filing from the IRS for every member of the household that is 18 years old or over who doesn't file taxes. This can be obtained by filling out either IRS Tax Form 4506-T or 4506T-EZ or online at: [IRS Tax Transcript Request](#).

If you are submitting the paper form, you can request a copy of one from our office or the local IRS office. Then, fill out the IRS form according to the IRS instructions, make a copy of the completed form and include it in your Home Improvement Application. Mail off the original to the address stated in the IRS Instructions. When your verification of non-filing letter arrives, bring a copy of it to the Community Development Office.

**Q: Where can I make copies of my documents to submit in my application?**

**A:** St. Louis County Libraries offer copying at low cost (typically \$.10-\$.15/ page)  
The Florissant Valley branch is located a half mile from our offices at:  
Florissant Valley Branch Library  
195 N New Florissant Rd, Florissant, MO 63031  
(314) 994-3300

**Q: I don't have a mortgage on my home. What do I submit for my mortgage statement?**

**A:** You will need to fill out an Affidavit of No Mortgage. Request a copy from Community Development Office, sign and fill it out. Then, include it in place of a mortgage statement in your application packet.



# CITY OF FLORISSANT

## RESIDENTIAL TREE SERVICE PROGRAM APPLICATION



**Q: Someone in my household lost their social security card. What can we do?**

**A:** Call or visit your local Social Security Office to request a replacement. They will issue you a letter showing your request. You can submit a copy of this letter in your application as a placeholder until your new card comes in. When you have the new card, make a copy of it and submit it to the Community Development Office. The local Social Security Office is located at:

11753 W Florissant Ave, Florissant, MO 63033

Phone: (800) 772-1213

**Q: I pay for my homeowner's insurance through escrow. What document are you looking for?**

**A:** Call your homeowner's insurance agency and ask for a document or letter that includes: the insured address, policy dates, and an indication of some kind that the policy is paid current/zero balance due. You can also supply us with a copy of your receipt if it was mailed to you, or a mortgage statement that shows the disbursement amount and date.

**Q: I pay for my real estate taxes through escrow. What document are you looking for?**

**A:** Proof of payment can be printed from the St. Louis County Revenue website at <https://revenue.stlouisco.com/ias/>. You can also supply us with a copy of your receipt if it was mailed to you, or a mortgage statement that shows the tax disbursement amount and date.

**Q: Where can I get a copy of my deed?**

**A:** Deeds can be obtained in person at the St. Louis County Recorder of Deeds at 41 South Central 4th floor, Clayton, MO 63105. Or online at <https://tapestry.fidlar.com/Tapestry2/>.

Remember, if the name of a deceased person appears on the deed, a death certificate is required. Examples of accepted documents: General Warranty Deed, Special Warranty Deed or Quit Claim Deed. A Deed of Trust is not acceptable.

**Q: My mail says Florissant, but I don't live within the city limits. Am I still eligible?**

**A:** No, only residents who live within the city limits of Florissant are eligible for participation in the Residential Tree Service Program. If your home is located in unincorporated St. Louis County, or neighboring municipalities you are not eligible for the Florissant Residential Tree Service Program. For assistance, contact your county or municipal offices to inquire about similar programs.





# CITY OF FLORISSANT

## RESIDENTIAL TREE SERVICE PROGRAM APPLICATION



Q: I don't have access to email to receive a document I need for my application. Can they send it directly to your office?

A: No. However, there are local services that can assist you in sending or receiving faxes. An example of this type of business would be a FedEx or UPS store.

To print from the web or your email the Florissant Valley branch is located a half mile from our offices at:

Florissant Valley Branch Library

195 N New Florissant Rd, Florissant, MO 63031

(314) 994-3300

Q: Someone lives with me but does not contribute financially. Do I still have to count their income?

A: Yes, the combined household income must include all occupants 18 years old or over, regardless of their contribution to the household.