



**City of Valley City, North Dakota  
Application for  
Tree Trimming and Removal Service  
License**

**FOR PERIOD: January 1 – December 31**

*The undersigned hereby makes application for a license to the City of Valley City, North Dakota, and agrees to comply with the requirements of City Ordinances pertaining thereto.*

**Name of Business:** \_\_\_\_\_

**Owner:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_

**File the following with the City Auditor as part of this application:**

\_\_\_\_\_ **Certificate of Liability Insurance**

**LICENSE FEE:** \_\_\_\_\_ \$100 if **initial application**, make checks payable to City of Valley City  
\_\_\_\_\_ \$50 if **renewal application**

**RETURN TO:** Valley City Auditor  
P. O. Box 390  
Valley City, ND 58072  
**Phone:** (701) 845 – 1700