

ARBORIST'S REGISTRATION  
CITY OF OLNEY  
300 S. Whittle Ave. – Olney, Illinois 62450  
618-395-7302 / Fax 618-395-7304

Anyone engaged in the business or occupation of pruning, treating, or removing trees within the City of Olney must be registered with the City Clerk. Any person doing business as a subcontractor will be construed as engaged in the business and is required to be registered (Ordinance 96-19).

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_

CELL #: \_\_\_\_\_ FAX: \_\_\_\_\_

INSURANCE

No person shall be registered with the City Clerk as an arborist unless a certificate of insurance is filed showing possession of liability insurance with limits not less than \$300,000 per person, \$750,000 aggregate for liability due to personal injury claims, and \$300,000 property damage indemnifying the City or any person injured or damaged as the result of tree work.

Name of Insurance Company: \_\_\_\_\_

Address of Insurance Company: \_\_\_\_\_

**Please Attach a Certificate of Insurance**

I have answered the above correctly, to the best of my ability, and understand that I am required to comply with all laws or ordinances pertaining to or regulating the activities engaged in.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

Fee: \$25.00      Receipt #: \_\_\_\_\_      Date: \_\_\_\_\_      Registration #: \_\_\_\_\_