

TENNESSEE LANDMARK AND HISTORIC TREE REGISTER

NOMINATION APPLICATION

Date of Application: _____

I. Type of designation: Landmark* Historic** Heritage***

***A Landmark Tree must meet one of the following requirements (please mark which)**

- The tree(s) is/are commonly recognized as an established and familiar feature of the community, or can be confirmed as a significant part of the community's heritage.
- The tree(s) was/were planted by, or as a memorial to, or associated with, a nationally, regionally, or state recognized individual, group, event, or cause, **and** is confirmed to be more than 50 years old.

****A Historic Tree must meet the following requirement (please mark)**

- The tree(s) was/were a direct witness to a historic event or cultural movement that was significant nationally, regionally, or within the state and can be confirmed to date to that time.

*****A Heritage Tree must meet the following requirement (please mark)**

- A Heritage Tree is a famous tree that is now dead but would have met the requirements for either Landmark Tree or Historic Tree had it still been alive.

II. Application is for a: Single tree Group of trees

III. Location (give street address if available and include directions to the tree)

Street Address: _____

City: _____ Zip: _____

County: _____

GPS coordinates if available _____ Latitude _____ Longitude _____

Directions to tree (attach a map if possible):

IV. Historic or landmark narrative

Attach a historic narrative that gives a factual account of the history of the tree or group of trees and the surrounding area, which gives the tree(s) its significance. Include important dates, people, events, legends, activities, etc. associated with the tree. (*attach additional sheet if necessary*)

V. Ownership of tree (If organization, corporation, government, or non-profit, include contact name and title)

Name: _____

Address: _____

City: _____

Phone: _____ Email: _____

VI. Name By Which Tree is Known: _____

Why is the tree so named? _____

VII. Tree(s) Description

1. Health

Excellent (no visible or known defects or health problems)

Good (appears in good health with only minor defects)

Fair (appears in average health with some obvious defect)

Poor (trees in noticeable decline)

Bad (tree is in severe decline)

Dead (**Heritage Tree only**). Please indicate when tree died and how, if known

2. Species (include at least the common name, and genus and species if possible, i.e. Black Walnut, *Juglans nigra*)

Common Name: _____

Scientific Name: _____

3. Measurements (provide if possible)

- Trunk circumference at 4 ½ feet above ground: _____ inches
- Total tree height: _____ feet
- Average crown spread (feet from trunk): _____ feet
- Age: _____ years (if known)

4. **Land use:** Residential Commercial Woodland Farmland
 Cemetery (circle one: private public)
5. **Photographs** (A set of non-returnable color prints of the tree(s) is required with the application).
Maps or diagrams of locations are also helpful. **The applicant grants TUFC all rights and
privileges to the images and information attached to, or included in, this application. **

VIII. Applicant Information

Name: _____

Title and Organization: _____

Address: _____

Telephone: _____ Email: _____

Date of Application: _____

ATTACHMENTS (photographs, maps, pertinent documents)

Although the Tennessee Urban Forestry Council encourages the owner of each Landmark and Historic Tree to give it proper arboricultural care, the Tennessee Urban Forestry Council does not certify the tree as being safe or without hazard for the visiting public.

Mail complete application to: The Tennessee Urban Forestry Council
P.O. Box 58443
Nashville, TN 37205