



## Western Joshua Tree Hazard Management Permit

### Information

Western Joshua tree hazard management permits are issued to property owners for the purpose of removing or trimming dead western Joshua tree(s) or trimming living western Joshua tree(s) provided that the dead western Joshua tree(s) or any limb(s) to be removed meet one of the following conditions:

- A) Has fallen over and is within 30 feet of a structure;
- B) Is leaning against an existing structure; or
- C) Creates an imminent threat to public health and safety.

A western Joshua tree is considered “dead” if it meets at least one of the following criteria<sup>1</sup>:

- 1) Has not burned and has no green leaves, no new growth on the main stem, and no basal sprouts;
- 2) Has partially or fully burned at least 18 months prior, has no green leaves, no new growth on the main stem and no basal sprouts; or
- 3) Has fallen and is completely detached from its roots or has fallen and its roots are no longer in contact with the soil.

To apply for a western Joshua tree hazard management permit, please complete this application by filling out Sections 1-6, below, and submit your completed application with photographs to the California Department of Fish and Wildlife by:

Email (preferred) to: [WJTHazardPermit@wildlife.ca.gov](mailto:WJTHazardPermit@wildlife.ca.gov)

-OR-

Mail to:


California Department of Fish and Wildlife  
Habitat Conservation Planning Branch  
Attention: Western Joshua Tree Permitting  
P.O. Box 944209  
Sacramento, CA 94244-2090

Questions should be directed to: [WJTHazardPermit@wildlife.ca.gov](mailto:WJTHazardPermit@wildlife.ca.gov)

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<sup>1</sup> See Fish & G. Code, § 1927.1(d).



<b>Section 1. Property Owner Contact Information (Required)</b>	
<b>Property owner's name:</b>	
<b>Property owner's phone number:</b>	
<b>Property owner's e-mail address:</b>	
<b>Property owner's mailing address:</b>	
With accordance to <a href="#">California Civil Code §1633.5(b)</a> , I acknowledge that by providing my electronic signature for this form, I agree that my electronic signature is legal binding equivalent to a handwriting signature. I hereby confirm that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it.	
<b>Property owner Signature:</b> 	<b>Date:</b>

<b>Section 2: Property Location of the Western Joshua Tree(s) to be Removed or Trimmed (Required)</b>
<b>Street address:</b>
<b>Assessor's Parcel Number (APN)*:</b>
<b>City/Town:</b>
<b>County:</b>

\*Only required If no street address is available

<b>Section 3: Condition of Western Joshua Tree(s) (Required)</b>
Please complete the table below noting the condition of each tree you are requesting a permit to remove or trim. Condition: <ul style="list-style-type: none"><li>(A) Has fallen over and is within 30 feet of a structure;</li><li>(B) Is leaning against an existing structure; or</li><li>(C) Creates an imminent threat to public health or safety</li></ul>

For Internal Use	Permit #:
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**Section 3: Condition of Western Joshua Tree(s) Continued**

Tree #	Tree Condition (Dead/Alive)	Is the tree completely detached from the roots? (Yes/No)	Management Request (Remove/Trim <sup>1</sup> )	Condition: (A, B, C) Select all that apply
1				
2				
3				
4				

<sup>1</sup>With a hazard management permit, a dead western Joshua tree that is detached or a detached limb may be removed by the property owner. Trimming or removal of attached western Joshua trees must be completed by a desert native plant specialist.

**Section 4. Photographs (Required)**

Please attach photographs of the western Joshua tree(s) to be trimmed or removed showing that the condition of each western Joshua tree meets one or more of the conditions listed in Section 3, above. Photographs should be taken from an adequate distance and angle(s) to allow CDFW to determine the condition of the trees and their location relative to any existing structure(s).

If requesting management of multiple trees, please complete the table below and use additional attachments if needed.

Tree #	Tree Condition (Dead/Living)	Management Request (Remove/Trim)	Photo Name(s)
1			
2			
3			
4			

**Section 5. Additional Information (Optional)**

Provide any additional information or justification here:

Empty text box for providing additional information or justification.



**Section 6. Dead Western Joshua Tee Attestation or Certification**

**(Required only for removal or trimming of dead western Joshua tree(s))**

All applications for removing or trimming one or more dead western Joshua tree(s) must be accompanied by either a signed attestation from the property owner or a certification from a desert native plant specialist that each tree proposed for trimming or removal meets the definition of a “dead western Joshua tree” per Fish and Game Code section 1927.1(d). **No attestation or certification is required for permit applications seeking to trim living western Joshua trees.** For permit applications seeking to remove or trim one or more dead western Joshua trees, please complete one of the following:

**PROPERTY OWNER ATTESTATION**

The undersigned hereby attests that they own are the property owner, and the western Joshua tree(s) to be removed pursuant to this permit application meet(s) the definition of “dead western Joshua tree” per Fish and Game Code section 1927.1(d).

With accordance to [California Civil Code §1633.5\(b\)](#), I acknowledge that by providing my electronic signature for this form, I agree that my electronic signature is legal binding equivalent to a handwriting signature. I hereby confirm that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it.

Signature:  \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**DESERT NATIVE PLANT SPECIALIST CERTIFICATION**

The undersigned hereby certifies that they are a desert native plant specialist, as defined in Fish and Game Code section 1927.1(e), and that the western Joshua tree(s) to be removed pursuant to this permit application meet(s) the definition of “dead western Joshua tree” per Fish and Game Code section 1927.1(d).

Signature:  \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Business or Agency Affiliation (optional): \_\_\_\_\_

Phone number (optional): \_\_\_\_\_

E-mail address (optional): \_\_\_\_\_