

ROUTE	SECTION	COUNTY	TOTAL SHEETS	SHEET NUMBER
VARIOUS	2010-030DTR	VARIOUS	4	3

CONTRACT 60K70

ID: \_\_\_\_\_

### DEAD AND DISEASED TREE REMOVAL REQUEST

REQUESTED BY: \_\_\_\_\_ DATE OF REQUEST: \_\_\_\_\_

YARD: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_

*(Please complete information when request for tree removal is from outside the Bureau of Maintenance)*

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

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

TELEPHONE: ( ) \_\_\_\_\_

**LOCATION OF DEAD/DISEASED TREE(S)**  
*(Please fill out completely to expedite locating the repair)*

COUNTY: \_\_\_\_\_ TOWN/CITY: \_\_\_\_\_

MARKED/NAMED ROUTE: \_\_\_\_\_

DIRECTIONS FROM NEAREST MAJOR CROSS ROAD OR MAJOR LANDMARK: \_\_\_\_\_

\_\_\_\_\_

SIDE OF ROADWAY: \_\_\_\_\_

ADDITIONAL DIRECTIONS TO TREE: \_\_\_\_\_

\_\_\_\_\_

**PLEASE INDICATE APPROXIMATE SIZE AND NUMBER OF TREES BASED ON VISUAL ESTIMATE**

\_\_\_\_\_ (Size/Number)

COMMENTS: \_\_\_\_\_

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OFFICE USE ONLY

DATE INSPECTED: \_\_\_\_\_ TYPE OF REMOVAL: \_\_\_\_\_

DTR #: \_\_\_\_\_

CONTRACT #: \_\_\_\_\_

WORK ORDER #: \_\_\_\_\_ NOTES: \_\_\_\_\_

POSTED IN SUMMARY: \_\_\_\_\_

**RETURN REQUESTS TO CONTRACTS SECTION**

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1/1/98.08

ILLINOIS DEPARTMENT OF TRANSPORTATION

SAMPLE WORK ORDER

DEAD TREE REMOVAL