



Application for

Natural Resources Inventory/ Forest Stand Delineation

NRI/FSD

4/11

City of Rockville

Department of Recreation and Parks/Forestry Division

14625 Rothgeb Drive, Rockville, Maryland 20850

Phone: 240-314-8700 • Fax: 240-314-8719 • Website: www.rockvillemd.gov

Type of Application:

Single Family Residential Other

Please Print Clearly or Type

Property Address information _____

Subdivision _____ Lot (s) _____ Block _____

Zoning _____ Tax Account (s) _____ , _____ , _____

Plat Book _____ Plat No. _____ Liber _____ Folio _____ Parcel _____

Size of Property _____ AC. Limits of Disturbance _____ AC

Applicant Information:

Please supply Name, Address, Phone, Fax Number and E-mail Address

Applicant _____

Property Owner _____

Qualified Preparer _____

Project Name _____

Project Description _____

STAFF USE ONLY

Application Acceptance:

FTP # _____

CPDS Project # _____

Date Accepted _____

Staff Contact _____

Date Received _____

Reviewed by _____

Date of Checklist Review _____

Total Fee _____

Instructions for Completing NRI/FSD Applications

1. The NRI/FSD must be approved prior to the submission of the following plans: Special Exception Plans (SPX), Site Plans (STP), Site Plan Amendments (STP) Project Plans (PJT) or Project Plan Amendments (PJT).
2. For single family dwellings:
 - a. The NRI/FSD may be submitted as a combined plan with the Forest Conservation Plan/Tree Save Plan. A completed application for both an NRI/FSD and FCP must accompany these submissions along with the appropriate NRI/FSD and FCP review fee.
 - b. An ISA certified arborist may prepare NRI/FSD and FCP/Tree Save Plans.
3. Please refer to the Checklist for NRI/FSD Plans, which outlines the specific requirements, and submit the checklist with the completed NRI/FSD application.

Common Mistakes on NRI/FSD submissions:

- Incomplete application including missing information such as e-mail addresses
- Incorrect afforestation and conservation thresholds
- Incorrect species identification
- Failure to graphically show critical root zones or correct CRZs
- Failure to include off site trees and structures
- Trees incorrectly located on the plan
- Incorrect buffers
- Plans not signed and stamped
- No statement addressing RTE species, cultural and/or historic resources

Existing Site Use(s) (to include office, industrial, residential, commercial, medical etc.) _____

Previous Approvals: (if any)	
Application Number	Date
_____	_____
_____	_____
_____	_____

A letter of authorization from the owner must be submitted if this application is filed by anyone other than the owner.
I hereby certify that I have the authority to make this application, that the application is complete and correct and that I have read and understand all procedures for filing this application.

Applicant signature

Plan preparer signature and date