

**TREE PLANTING AWARD
NOMINATION FORM**

Date Submitted: _____

CATEGORY: Subdivision Plan Site Plan Infill Lot Grading Plan Other

Project Name: _____ Plan Number: _____
Street Address: _____ Zip Code: _____
Tax Map # _____ Magisterial District: _____
Nominated By: _____ Nominator's Phone#: _____
Email: _____

NOMINEE: (check one): Developer Builder Owner Other _____
Name: _____ Contact Person: _____
Email: _____ Phone #: _____
Address (city, state, zip): _____

General Contractor: _____ Contact Person: _____
Email: _____ Phone #: _____
Address (city, state, zip): _____

DESIGN PROFESSIONALS: Provide the names and addresses of members of the design team who worked to develop the landscape plan (Add additional sheets if needed)

Landscape Architect/Designer (include any certifications): _____
Company Name: _____ Contact Person: _____
Email: _____ Phone #: _____
Address (city, state, zip): _____

Landscape Contractor: (include any certifications)
Company Name: _____ Contact Person: _____
Email: _____ Phone #: _____
Address (city, state, zip): _____

TREE PLANTING AWARD NOMINATION FORM, Project Name:

Project Arborist: (include any certifications):

Company Name: _____ Contact Person: _____

Email: _____ Phone #: _____

Address (city, state, zip): _____

BASIS FOR NOMINATION:

- | | | |
|--|------------------------------|-----------------------------|
| 1. Did landscaping exceed planting requirements for this site? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Was a pre-design site assessment conducted? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Was a soil management plan created and communicated to all personnel? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Were disturbed soils restored prior to planting? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Does tree planting enhance the functionality of the project and site? (e.g. mitigate stormwater, shade buildings/pavement, used for Environmental education). | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Were sustainable, natural landscaping techniques used to conserve resources and simplify maintenance operations? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Were non-native invasive plants controlled, managed or removed? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Were appropriate plants used, with emphasis on local native species? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Was a plan developed and implemented for maintenance of the Landscape throughout the establishment period? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

TREE PLANTING AWARD NOMINATION FORM, Project Name:

Please elaborate below on what makes this nominee stand out as an example of tree planting. Provide project summary, identifying any unique and/or special features about the site and how this project went above and beyond Fairfax County tree planting requirements. **Include photos illustrating what the site looked like prior to development, during development and after development, highlighting notable areas and efforts that merit award consideration. Add extra sheets, if needed.**

***ADD EXTRA SHEETS IF NEEDED**

To Submit the Form:

Scan and email to treemail@fairfaxcounty.gov.

Or mail to:

**Urban Forest Management Division
12055 Government Center Pkwy., Suite 518
Fairfax, VA 22035**