



The Village of Glenview

Heritage Tree Program Nomination Form

Application Date: _____

Nominated Tree Information

Common Name: _____

Scientific Name: _____

Detailed Directions for Locating Tree (attach map if possible):

This tree should be a Village of Glenview Heritage Tree (check all that apply):

____ Size ____ Aesthetic Beauty ____ Condition ____ Historical Significance

Explain below and attach any supporting documentation (photo, written history, etc.)

Tree Nominator Information

Name: _____

Address: _____

Phone: _____ E-mail: _____

Tree Owner Information – Nominator must ensure that owner gives permission for nomination and access for evaluation

Name: _____

Address: _____

Phone: _____ E-mail: _____

Submit form to:

Village of Glenview

Natural Resources Manager

2498 East Lake Ave. * Glenview, IL 60026

Ph. (847) 657-3030 * Fax (847) 724-1345

rflakne@glenview.il.us * www.glenview.il.us