

TOWN OF COLLIERVILLE

Assurance of Completed Landscaping, Irrigation, and Tree Mitigation

Planning Division
500 Poplar View Pkwy
Collierville, TN 38017

Telephone: (901) 457-2360
Fax: (901) 457-2354
Website: www.collierville.com



I, the undersigned, being a registered Landscape Architect licensed to practice in the state of Tennessee, confirm that (initial below):

_____ I personally visited the site on _____(date), and verify that the installed landscaping is in compliance with the landscaping plan approved by the Design Review Commission, the Board of Mayor and Aldermen, and/or Town staff.

_____ I have personally visited the site on _____ (date), and found changes or substitutions of plant material, quantities size, etc., during construction, from the Town-approved landscaping plan. The Developer/designer has notified the Planning Division in writing explaining why this is necessary. This form is accompanied by either comments (right) or a narrative and/or plans illustrating the changes. I hereby verify:

- that the installed landscaping is in compliance with the Design Guidelines and the Zoning Ordinance; and
- the Planning Division has administratively approved these changes:

_____ Project Planner

_____ Date

Furthermore, I, the undersigned, confirm that I have provided the following as-built plans, and, as applicable, in the format required by the Planning Division (initial below):

_____ Tree Mitigation Plan

_____ Landscaping Plan(s)

_____ Irrigation Plans(s)

_____ Other

Project Name:

Printed Name:

Signature:

TN RLA#:

Design Firm:

Date:

Comments:

Affix Professional Seal Here, Sign, and Date