



# ARKANSAS CHAMPION TREE NOMINATION FORM

TREE SPECIES: Common Name \_\_\_\_\_  
Scientific Name \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT INFO: Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

NOMINATOR'S NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT INFO: Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

Does owner agree to the tree being selected as the State Champion Tree? Yes No  
Does the owner agree that the tree will be available for public inspection? Yes No

LOCATION OF TREE: County \_\_\_\_\_ City \_\_\_\_\_

Give specific location, so that the tree may be found by someone not familiar with the area where the tree is located:  
\_\_\_\_\_  
\_\_\_\_\_

GPS: Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Is the tree located on public or private land? Public Private  
If located on private land, is the tree viewable from the street? Yes No

MEASUREMENTS: Circumference (in feet and inches) at 4.5 feet above ground: \_\_\_\_\_  
Average diameter spread of crown to the nearest foot: \_\_\_\_\_  
Vertical height to the nearest foot: \_\_\_\_\_

Measured on date: \_\_\_\_\_ Measured by: \_\_\_\_\_

Additional information about the tree: \_\_\_\_\_  
\_\_\_\_\_

District Forester \_\_\_\_\_ County Forester \_\_\_\_\_

Please submit one copy of this form to: Arkansas Forestry Commission  
Attention: Krista Quinn  
PO Box 10  
Greenbrier, AR 72058  
E-mail: [Krista.Quinn@agriculture.arkansas.gov](mailto:Krista.Quinn@agriculture.arkansas.gov)

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For office use only:  
Circ. (in.) \_\_\_\_\_ Crown Spread (ft.) \_\_\_\_\_ Height (ft.) \_\_\_\_\_ Bigness Index \_\_\_\_\_  
Date Made Champion: \_\_\_\_\_