



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

TREE LOCATION: County _____ City _____

Give specific location, so someone not familiar with the area can locate the tree :

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: _____

Date measured: _____ Measured by: _____

Additional information about the tree:

District Forester _____ County Forester _____

Please submit this form and photos of the tree (see notes*) to: Arkansas Dept of Agriculture - Forestry Division

Attention: Harold Fisher

PO Box 10

Greenbrier, AR 72058

**Individuals may send in photos, or Forestry Division personnel will take them.*

Photos Needed:

- Entire tree (from ground level to top of crown)
- Photo showing tree size in relation to a person (photo of person in front of trunk, measuring tree, etc)

E-mail: harold.fisher@agriculture.arkansas.gov

For office use only:

Circ. (in.) _____ Crown Spread (ft.) _____ Height (ft.) _____ Bigness Index _____

Date Made Champion: _____