

ARKANSAS CHAMPION TREE

NOMINATION FORM

TREE SPECIES:	Common Name				
	Scientific Name				
OWNER'S NAME:					
ADDRESS:					
CONTACT INFO:	Phone				
	E-mail				
NOMINATOR'S NAME:					
ADDRESS:					
	Phone				
	E-mail				
Does owner agree to tl	he tree being selected as			Yes	No
Does the owner agree that the tree will be available for public insp				Yes	No
TREE LOCATION:	County		City		
Give specific location, s	so someone not familiar	with the area can lo	cate the tree :		
GPS: Latitude	Longit	ude			
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 r	nearest foot:			
Date measured:	Me	asured by:			
Additional information	about the tree:				
District Forester		County Forester			
Please submit this h	orm and photos of the t	ree (see notes ') to:	-	of Agriculture ntion: Harold	e - Forestry Division Fisher
*Individuals may send in p	hotos, or Forestry Division pe	rsonnel will take them.		ndustrial Boul	
Photos Needed:				nbrier, AR 720	
	und level to top of crown) size in relation to a person		Circe.		
(photo of person in fr	E-mail: harold.fisher@agriculture.arkansas.gov				
*****	******	*****	*****	*****	****
For office use only:					
-	rown Spread (ft.)	Height (ft.)	Bign	ess Index	
Date Made Champion:					