

Missouri Department of Transportation
David B. Nichols, Director

573.751.2551
Fax: 573.751.6555
1.888.ASK MODOT (275.6636)

[DATE]

[OWNER NAME]
[OWNER ADDRESS]
[OWNER CITY], [OWNER STATE] [OWNER ZIP]

RE: Permit [PERMIT NUMBER]
[COUNTY] County, [ROUTE]

Dear [OWNER CONTACT]:

Below please find the tabulation of fees for your recent request to cut vegetation four hundred and fifty feet (450') in each direction of permit [PERMIT NUMBER] located on [ROUTE] in [COUNTY] County.

<u>Tree</u>	<u>Measurement</u>	<u>Fee</u>
[TREE 1]	[MEASUREMENT 1]	[FEE 1]
[TREE 2]	[MEASUREMENT 2]	[FEE 2]
[TREE 3]	[MEASUREMENT 3]	[FEE 3]
[TREE 4]	[MEASUREMENT 4]	[FEE 4]
[TREE 5]	[MEASUREMENT 5]	[FEE 5]
[TREE 6]	[MEASUREMENT 6]	[FEE 6]
[TREE 7]	[MEASUREMENT 7]	[FEE 7]

TOTAL: [TOTAL FEE]

Due to special circumstances regarding this location, please adhere to the following instructions:
[INSTRUCTIONS]

Upon receipt of the payment of [PAYMENT AMOUNT], a permit will be issued. It is your responsibility to see that the work is completed in accordance with 7 CSR 10-6.085 and as set forth above. If you have any questions, please contact me at [PHONE NUMBER].

Sincerely,

[PERMIT SPECIALIST]
[PERMIT SPECIALIST TITLE]

