



**County of Santa Cruz Health Services Agency
Environmental Health**

701 Ocean Street, Room 312 ❖ Santa Cruz, CA 95060
831-454-2022 ❖ Fax 831-454-3128
<https://www.scceh.org/>

Withdrawal Form

To cancel the ROE, this Withdrawal Form must be signed by all the owners/agents, delivered to Santa Cruz County Environmental Health, and acknowledged by an authorized employee in advance of Debris and Hazard Tree Removal activities at the Property. Allow at least three (3) days to process.

Alternatively, the ROE may be cancelled at the Property site **by obtaining the signature of designated Santa Cruz County Representative present when the crew appears for work.** Due to scheduling constraints, the Government cannot provide specific dates and times when they will be available at the Property site to accept a cancellation. Owner should therefore turn in the Withdrawal Form at the location designated by the County in the above paragraph if possible.

I have read and understand the foregoing statement concerning cancellation policies. I hereby certify that the Debris and Hazard Tree Removal at the Property has not yet commenced, and that I request to cancel the Right of Entry (ROE).

Name of Owner/Agent:
Phone Number(s) of Owner/Agent:
Burn Property Address:
City/State/Zip:
Assessor's Parcel Number (APN):
Email of Owner/Agent:
Mailing Address of Owner/Agent:
City/State/Zip of Owner/Agent:
Signature of Owner/Agent:
Name of Owner/Agent:
Phone Number(s) of Owner/Agent:
Email of Owner/Agent:
Mailing Address of Owner/Agent:
City/State/Zip of Owner/Agent:
Signature of Owner/Agent:
Name of Owner/Agent:
Phone Number(s) of Owner/Agent:

Email of Owner/Agent:
Mailing Address of Owner/Agent:
City/State/Zip of Owner/Agent:
Signature of Owner/Agent:

All trustees or signatories must sign the Residential Debris Removal Withdrawal Form

RETURN VIA EMAIL to CZUDebris@santacruzcounty.us.

OR IN MAIL: Santa Cruz County Environmental Health, 701 Ocean Street, Room 312, Santa Cruz, CA 95060.

RETURN IN PERSON AT THE ABOVE ADDRESS BY FIRST MAKING AN APPOINTMENT BY SENDING AN EMAIL TO CZUDebris@santacruzcounty.us OR CALLING 831-454-2022.

Title and Printed Name of County Representative

Signature of County Representative

Date