



New Jersey Urban and Community Forestry Program Annual Accomplishment Report

Municipal Information

1. Reporting on year:

2. Date of Report Submission

3. Municipality:

4. County:

5. CFMP 5-year Period

6. Primary Program Contact

Title

Organization

Phone number

Email

Address





General Information

7. Does your community have a tree care professional on staff (employed or retained) e.g. Licensed Tree Expert, Cert. Arborist, Forester

- Yes, Employed
- Yes, Retained
- No
- Other (please specify)

8. Does your community have a tree inventory?

- Complete
- Partial
- No

9. Have you submitted your Tree City USA Application?



Visit Tree City USA Page: <https://www.arboday.org/programs/treecityusa/>

(Most of the information you supply in this report can be used for your Tree City USA application)

Yes

No



Urban and Community Forestry Program Administration

10. Municipal/County Department responsible for tree management



Standard 1

Department Manager Name

Phone

Email

11. Name of Tree Advocacy Board (committee/commission/board)



Standard 1


Tree Advocacy Board Chair Name

Phone

Email



Community Tree Ordinance

12. Do you have an ordinance related to:  Standard 2

	Yes	No
Tree Planting	<input type="radio"/>	<input type="radio"/>
Tree Protection	<input type="radio"/>	<input type="radio"/>
Establishing a Committee or Commission Enabling Ordinance		
Tree replacement/no net loss		<input type="radio"/>
Tree Removal	<input type="radio"/>	<input type="radio"/>
Tree Pruning	<input type="radio"/>	<input type="radio"/>

Other

Other

Other

13. Have you reviewed your NJUCF Accreditation Status for 2020?

www.communityforestry.nj.gov

Yes

No



Statement of Tree Budget

14.		CFMP Budget (this should be what your estimated budget for this reporting year is in your CFMP)	Reporting Year Actual (this should be the expenditures for this reporting year)
Administration	Municipal Salaries		
	Fringe		
	Indirect Costs		
	Volunteer Contribution (Rate can be found at www.independentsector.org)		
	Other		
Subtotal			
UCF Stewardship	Planting		
	Pruning		
	Removal		
	Stump Removal		
	Leaf Collection		
	Insect/Disease Management		
	Emerald Ash Borer Management		
	Other		
Subtotal			
Education and Outreach	Training And Education (Mun.+County Employee)		
	Training and education (Volunteer)		
	Public Outreach		
	Other		
Subtotal			
Total			

Standard 3  **For your Tree City USA Application Budget:**
 (enter the totals provided here into your Tree City USA Online Application: <https://www.arboday.org/programs/treecityusa/>)

Tree Planting and Initial Care	
Tree Maintenance	
Removals	
Management	
Volunteer Contribution	



Arbor Day Event

15. Did your community celebrate Arbor Day in 2020?  Standard 4

Yes

No

16. Date of Arbor Day Event

17. Describe you Arbor Day Event:

- What type of event was it?
- Who hosted the event?
- Who attended the event?
- What was your role?
- Where was it held?
- How did it go?



Plan Implementation

Please compare CFMP section 9-Statement of Plan Implementation objectives for 2020 and your actual accomplishments for 2020.

*Examples: CFMP Timeline Objective-Conduct Street Tree Inventory
Accomplished this Year-Inventory started, but not yet complete*

22. CFMP Timeline vs. This year actual

CFMP Timeline Objective	<input type="text"/>
Accomplished this Year:	<input type="text"/>

CFMP Timeline vs. This year actual

CFMP Timeline Objective	<input type="text"/>
Accomplished this Year:	<input type="text"/>

CFMP Timeline vs. This year actual

CFMP Timeline Objective	<input type="text"/>
Accomplished this Year:	<input type="text"/>

CFMP Timeline vs. This year actual

CFMP Timeline Objective	<input type="text"/>
Accomplished this Year:	<input type="text"/>

23. Does your community utilize urban wood?

- Yes If yes, Wood chips or mulch
- No Firewood
- Lumber
- Y j qrg'hqi u"
- Compost
- Other



Highlights and Comments

24. Please provide one local urban and community forestry program highlight from the past year:
Attach pictures to this report *(any photos submitted may be used by NJUCF for promotional purposes)*

25. Please provide any comments or suggestions for the NJUCF program:

**ELETRONIC SUBMISSIONS ONLY : please send the
Annual Accomplishment Report to Emily Farschon**

Emily.Farschon@dep.nj.gov

26. I hereby certify as the Shade Tree Representative, that the information in this report was shared with our Mayor and/or Governing Body and that the NJUCF Accreditation Status for my community is up to date.

Signature:		
Print Name:	Title:	Date: