



**MARYLAND**  
 DEPARTMENT OF  
 NATURAL RESOURCES

Larry Hogan, Governor  
 Boyd Rutherford, Lt. Governor  
 Jeannie Haddaway-Riccio, Secretary

**CERTIFICATION OF QUALIFICATION (EXPERIENCE)**  
**FOR APPLICATION FOR TREE EXPERT LICENSE**

Applicant's name: \_\_\_\_\_

- For three years immediately preceding the date of this application, I have been engaged continuously in practice as a tree expert with a licensed tree expert in Maryland or with an acceptable tree expert company in another state.

**OR**

- I have one year of experience with a licensed tree expert in Maryland or with an acceptable tree expert company in another state.

List names of Licensed Tree Experts (L.T.E.s), companies, and dates of practice below, followed by signatures of the Licensed Tree Experts you practiced under.

ALL SIGNATORIES: I declare and affirm under penalties of perjury that the information I have supplied in this Application for Tree Expert License is true and correct to the best of my knowledge, information, and belief.

Tree Expert:	Company:	Dates of practice:	L.T.E. Signature and date:
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

Applicant:

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date