



SAVE & LOGOUT

What category best describes your community?*

Town

Mayor or Equivalent Information

*Mayor Name

*First

Gary

*Last

Lebsack

*Professional Title

Mayor

Mayors Address

*Address Line 1

PO Box 609

Address Line 2

*City

Johnstown

*State/Region

Colorado

*ZIP/Postal Code

80534

*Email Address

glebsack@johnstownco.gov

*Phone Number

US/Canada Outside US

970-587-4664

US: 402-555-1212

City Forestry Contact

(This is the person from your community we will be reaching out to if we have any questions about the application.)

*City Forestry Contact's Name

*First Name

Danielle

*Last Name

Gardner

*Professional Title

Executive Assistant

*Shipping Address for Recognition Materials

*Address Line 1

450 South Parish Avenue

Address Line 2

PO Box 609

*City

Johnstown

*State/Region

Colorado

*ZIP/Postal Code

*City Forestry Contact's Email Address

*Phone Number

US/Canada Outside US

US: 402-555-1212

If my application is approved, I DO NOT wish to have my name and email included on the Tree City Usa member resource directory (only available to other recognized Tree City USA communities.)

Standard 1 - A Tree Board or Department

*Select which best describes your community

*Tree Board Meeting Frequency

Chairperson

*Chairperson's Name

*First Name

*Last Name

*Professional Title

*Chairperson's Address

*Address Line 1

Address Line 2

*City

*State

*ZIP/Postal Code

80534

***Email Address**

glebsack@johnstownco.gov

***Phone Number**

US/Canada Outside US

970-587-4664

US: 402-555-1212

***How many additional Tree Board members are there?**

5

Board Member 1

Board Member 1 Name

***First Name**

Damien

***Last Name**

Berg

***Board Member 1 Email**

dberg@johnstownco.gov

Board Member 2

Board Member 2 Name

***First Name**

Troy

***Last Name**

Mellon

***Board Member 2 Email**

tmellon@johnstownco.gov

Board Member 3

***Board member 3 name**

***First Name**

Jesse

***Last Name**

Molinar

***Board member 3 Email**

jmolinar@johnstownco.gov

Board Member 4

Board member 4 name

***First Name**

Amy

***Last Name**

Tallent

***Board member 4 Email**

atallent@johnstownco.gov

Board Member 5

Board member 5 name

***First Name**

Chad

***Last Name**

Young

***Board member 5 Email**

cyoung@johnstownco.gov

Please upload full name and email address for any additional tree board members.

Attachments

UPLOAD ATTACHMENT

NAME	CREATED DATE	
Town Council Members	Nov 3, 2021 2:14:06 PM CDT	Edit Visit Delete

Department Chair/City Manager

Department Chair/City Manager Name

***First**

Matt

***Last**

LeCerf

***Professional Title**

Town Manager

***Phone**

US/Canada Outside US

970-587-4664

US: 402-555-1212

Address

***Address Line 1**

PO Box 609

Address Line 2

***City**

Johnstown

***State/Region**

CO

***ZIP/Postal Code**

80534

***Email Address**

mlecerf@johnstownco.gov

Standard 2 - A Community Tree Ordinance

***Date current tree ordinance was established**

x 12/21/2020 ...

Our ordinance below*

- Uploaded files have not changed
- Our ordinance has been updated this past calendar year and I have updated.

*** Attach File**

Each applicant is required to upload their community's current tree ordinance.

Attachments

UPLOAD ATTACHMENT

NAME	CREATED DATE	
Ordinance 2020-187	Oct 27, 2021 11:16:40 AM CDT	Edit Visit Delete
Ordinance 2020-182	Nov 3, 2021 5:02:08 PM CDT	Edit Download Delete

Standard 3 - A community forestry program with an annual budget of at least \$2 per capita

Please answer the questions below with the full numerical amounts and do not use symbols or commas. (i.e. 5000.01 not \$5,000.01). If a category does not apply to you, please enter 0.

For a list of qualifying expenses, [click here](#).

*** Community Population**

*** Tree Planting and Initial Care**

Include cost of tree purchases, labor and equipment for planting, planting materials, stakes, wrapping, watering, mulching, competition control, etc.

*** Tree Maintenance**

Include pruning, insect and disease management, fertilization, watering, etc.

*** Tree Removal**

Include cost of equipment, supplies, labor, etc.

*** Management**

Include public education, professional training, memberships, salaries, street and park tree inventory.

Utility Line Clearance

(If allowed by your state coordinator).

*** Volunteer Time**

Number of volunteer hours and other contributions from civic organizations.

Correct Examples:

- 10
- 12
- 284
- 3778

Incorrect Examples:

- 10 hrs
- 12 hours
- \$284.94
- 3,678

Other

Include any other expenses not mentioned.

Please specify other expenses (if applicable)

TOTAL Expenditure Per Capita: 3.95

TOTAL Expenditures: 68692.98

Community Tree Management Statistics

Please include only whole numbers below.

***Number of Trees Planted**

***Number of Trees Pruned**

***Number of Trees Removed**

Attach Files

Annual work plan (if required by your state).

Attachments

UPLOAD ATTACHMENT

NAME	CREATED DATE
No Data	

Supporting budget document(s).

Attachments

UPLOAD ATTACHMENT

NAME	CREATED DATE
No Data	

Standard 4 - An Arbor Day Observance and Proclamation

Date observance was held

x ...

Did your community's Arbor Day celebration include any type of participation from K-12 schools?*

Yes No

Attach Your Signed Arbor Day Proclamation*

Attachments

UPLOAD ATTACHMENT

NAME	CREATED DATE	
Arbor Day Proclamation	Nov 2, 2021 2:50:21 PM CDT	Edit Download Delete

Supplemental files

This can be a program from your Arbor Day events, photos, or press releases.

Attachments

UPLOAD ATTACHMENT

NAME	CREATED DATE	
Arbor Day Celebration	Nov 3, 2021 3:40:13 PM CDT	Edit Download Delete
Arbor Day Celebration	Nov 3, 2021 3:39:35 PM CDT	Edit Download Delete
Arbor Day Celebration	Nov 3, 2021 3:39:01 PM CDT	Edit Download Delete

How did you find out about the Tree City program?

The Town of Johnstown used to have Tree C

Signature Form

*** Before you print off your signature form, all sections of the application must be complete.**

To finalize your application, you will need to obtain a signature of your mayor or top city official. Your application requires the appropriate signature to be complete.

Click on the button below to populate your mayor signature page. (You will need to push this button anytime you make revisions to your application.)

POPULATE SIGNATURE PAGE

[Download Mayor Signature Form](#)

- Scan and upload the signature form
- Fax the signature form to the Arbor Day Foundation

By checking the box, you are granting the Arbor Day Foundation and its assigns, licensees, successors, representatives, employees, program partners, and agents (collectively, the “Arbor Day Foundation”), the irrevocable and unrestricted right to use uploaded images from this application. You grant the Arbor Day Foundation the irrevocable right to use, copy, prepare derivative works from, distribute and publish the provided photographs in any medium or means of distribution, including print, social media sites such as Facebook and Twitter and in Arbor Day Foundation publications or on its website, for any lawful commercial or other purpose, and to register the copyright of such photographs throughout the world. By granting rights to the photos, you are representing that you own the rights to the uploaded pictures on this application and that Arbor Day Foundation has permission to use said photos.

Please press the submit button below, once your application is complete. A successfully submitted application will redirect you to a new page. If you are not redirected, please scroll to the top of your application to see a notification of what information is missing/incorrect in order to submit your application.

SUBMIT

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