

STAFF REPORT

DATE: February 25, 2015

RE: 1435 18th Street (permit application #7289)

FROM: Karen DeMaria, Urban Forestry Manager,
City of Key West

An application was received for the removal of **(1) Gumbo Limbo tree**. A site inspection was done on February 18, 2015 and documented the following:

Tree Species: Gumbo Limbo (*Bursea simaruba*)









Diameter: 12.4"

Location: 60%

Species: 100% (on protected tree list)

Condition: 20%

Total Average Value = 60%

Value x Diameter = **7.4 replacement caliper inches**

Recommendations: Recommend approval of the removal of (1) Gumbo Limbo tree located at 1435 18th Street, to be replaced with 7.4 caliper inches of FL#1 native dicot or fruit trees.

Application

2-18-15
 NO ACCESS -
 Call For access
 into backyard
 ICD
 go Mon 2-23-15



7289

Tree Permit Application

Please Clearly Print All Information unless indicated otherwise.

Date: _____

Tree Address 1435 18th St.
Cross/Corner Street Duck Ave
List Tree Name(s) and Quantity 1 Gumbo Limbo
Species Type(s) check all that apply () Palm () Flowering () Fruit () Shade () Unsure
Reason(s) for Application:

- REMOVE Tree Health Safety () Other/Explain below
 () TRANSPLANT () New Location () Same Property () Other/Explain below
 () HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction

Other/Explain The vines have had a choke hold on this tree for a long time. It has been dropping termite eaten limbs lately and there is no doubt a lot of decay going on behind the vine leaf cover.

Reason for Request _____

Property Owner Name Fernando Clavo
Property Owner eMail Address JHCLARO@comcast.net
Property Owner Mailing Address 1435 18th St.
Property Owner Mailing City Key West **State** FL **Zip** 33040
Property Owner Phone Number (305) 393-6223
Property Owner Signature _____

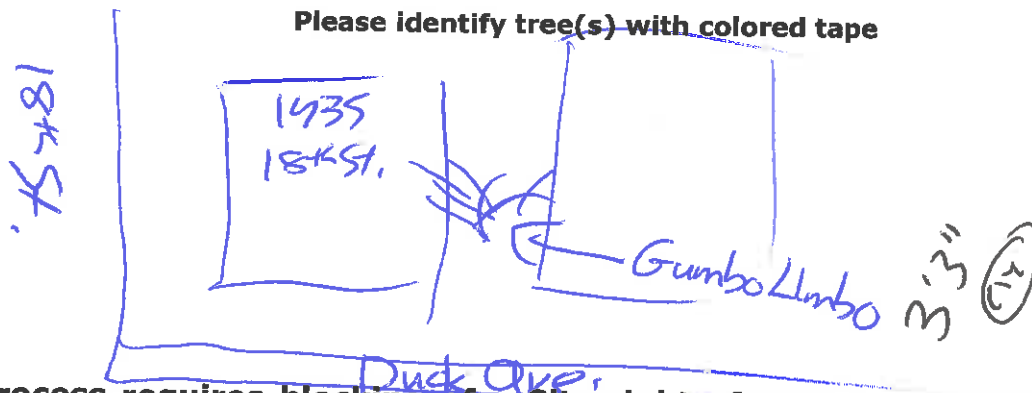
Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Laland St.
Representative Mailing City Key West **State** FL **Zip** 33040
Representative Phone Number (305) 296-8101

NOTE: A Tree Representation Authorization form must accompany this application if someone other than the owner will be representing the owner at a Tree Commission meeting or picking up an issued Tree Permit.

Tree Representation Authorization form attached ()

<<<<< Sketch location of tree in this area including cross/corner Street >>>>>

Please identify tree(s) with colored tape



If this process requires blocking of a City right-of-way, a separate ROW Permit is required. Please contact 305-809-3740.



1289

Tree Representation Authorization

Date: 2/11/2015

Attendance at the Tree Commission meeting on the date when your request will be discussed is necessary in order to expedite the resolution of your application. This Tree Representation Authorization form must accompany the application if the property owner is unable to attend or will have someone else pick up the Tree Permit once issued.

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1435 18TH ST (18TH AND DUCK)

Property Owner Name FERNANDO CLARO
Property Owner eMail Address JHCLARO@COMCAST.NET
Property Owner Mailing Address 1435 18TH ST
Property Owner Mailing City KEY WEST State FL Zip 33040
Property Owner Phone Number (305) 393-1223
Property Owner Signature [Signature]

Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Land St.
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 396-8101

I FERNANDO CLARO, hereby authorize the above listed agent(s) to represent me in the matter of obtaining a Tree Permit from the City of Key West for my property at the tree address above listed. You may contact me at the telephone listed above is there is any questions or need access to my property.

Property Owner Signature [Signature]

The forgoing instrument was acknowledged before me on this 11 day Feb 2015.

By (Print name of Affiant) FERNANDO CLARO who is personally known to me or has produced _____ as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Katherine M Crain
Print Name: KATHERINE M CRAIN
My Commission Expires: 5/25/2016

Notary Public - State of Florida (seal)

