

STAFF REPORT

DATE: February 22, 2016

RE: **1113 Packer Street (permit application # T16-7816)**

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

An application was received requesting the removal of **(1) Avocado tree**. A site inspection was done on February 17, 2016 and documented the following:

Tree Species: Avocado (*Persea americana*)











Diameter: 14.9"

Location: 70% (back yard tree)

Species: 100% (on protected tree list)

Condition: 30% (poor, one sided tree with a strong lean, decay)

Total Average Value = 66%

Value x Diameter = 9.8 replacement caliper inches

Recommendation: Recommend approval of the removal of one (1) Avocado tree at 1113 Packer Street to be replaced with 9.8 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted on site.

Application



7816

Tree Permit Application

Date: 2-16-2016

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1113 Packer St.
 Cross/Corner Street Catherine St.
 List Tree Name(s) and Quantity 1 avocado
 Species Type(s) check all that apply () Palm () Flowering (X) Fruit () Shade () Unsure
 Reason(s) for Application:

(X) REMOVE (X) Tree Health (X) Safety () Other/Explain below
 () TRANSPLANT () New Location () Same Property () Other/Explain below
 () HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction
 Other/Explain Tree is a hollowed out hazard which hangs over the pool and blocks a lot of light.
 Reason for Request

Property Owner Name Katie Innis
 Property Owner eMail Address k+innis@gmail.com
 Property Owner Mailing Address 1113 Packer St.
 Property Owner Mailing City Key West State FL Zip 33040
 Property Owner Phone Number (410) 371-5034
 Property Owner Signature

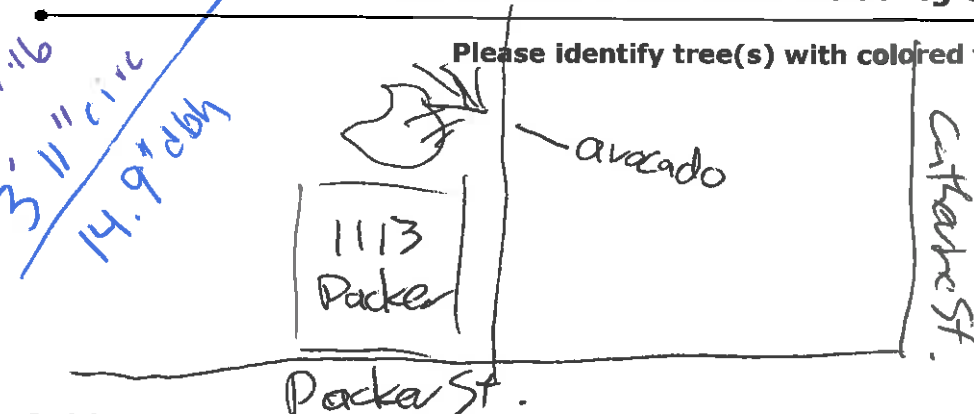
Representative Name Kenneth Khog
 Representative eMail Address
 Representative Mailing Address 1602 Lind St.
 Representative Mailing City Key West State FL Zip 33040
 Representative Phone Number (305) 296-8101

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.

✓PO



Tree Representation Authorization

Date: 1/29/2016

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 1113 Packer Street

Property Owner Name Katie Innis
Property Owner eMail Address ktinnis@gmail.com
Property Owner Mailing Address 1113 Packer St
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (416) 371-5034
Property Owner Signature Katie J

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

I Katie Innis, 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

Mary Kathleen J Katie J

The forgoing instrument was acknowledged before me on this 29th day of January.

By (Print name of Affiant) Mary Kathleen Innis who is personally known to me or has produced Maryland Driver's License as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Colleen L Fuller

Print Name: Colleen L Fuller

My Commission Expires: June 3, 2019

Notary Public - State of Florida (seal)

