STAFF REPORT

DATE: June 1, 2022

RE: 3628 Duck Avenue (permit application # T2022-0149)

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

An application was received requesting the removal of (1) Sea Grape tree. A site inspection was done and documented the following:

Tree Species: Sea Grape (Coccoloba uvifera)



Photo of tree showing location, view 1.



Photo of tree showing location, view 2.



Photo of whole tree, view 1.



Photo of whole tree, view 2.



Photo of tree trunk.



Photo of surface root.



Photo of main tree trunks and tree canopy, view 1.

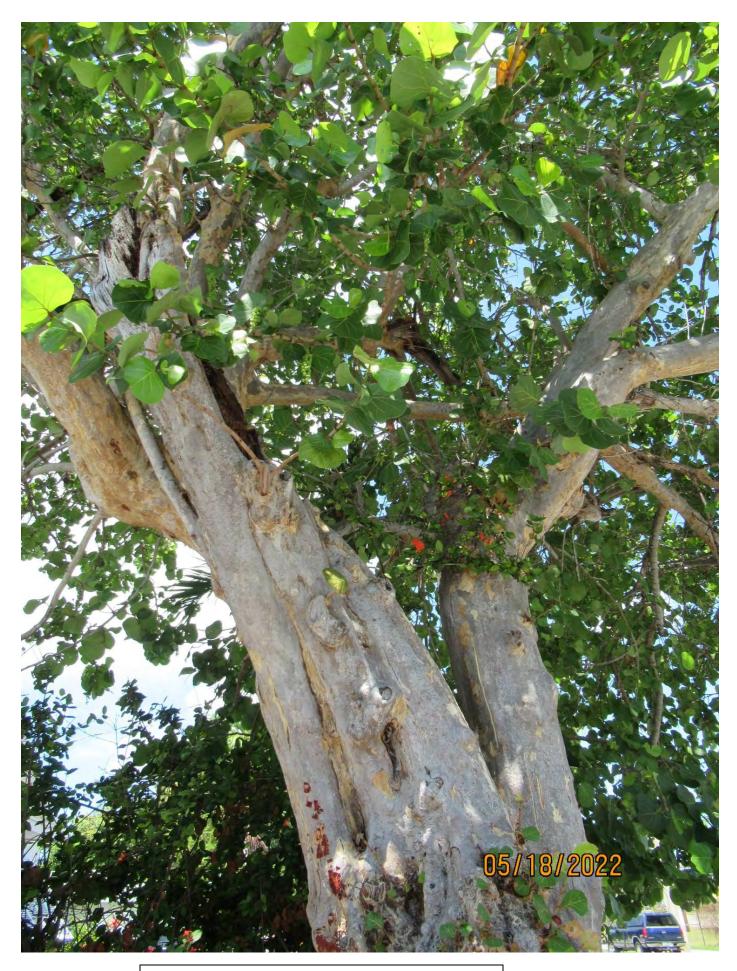


Photo of main tree trunks and tree canopy, view 2.

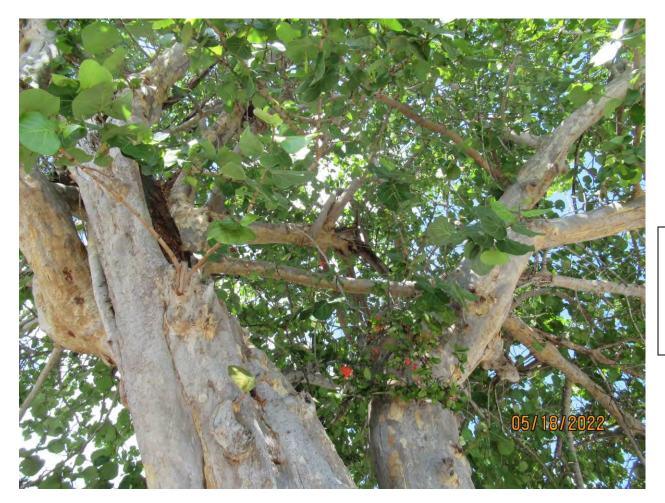
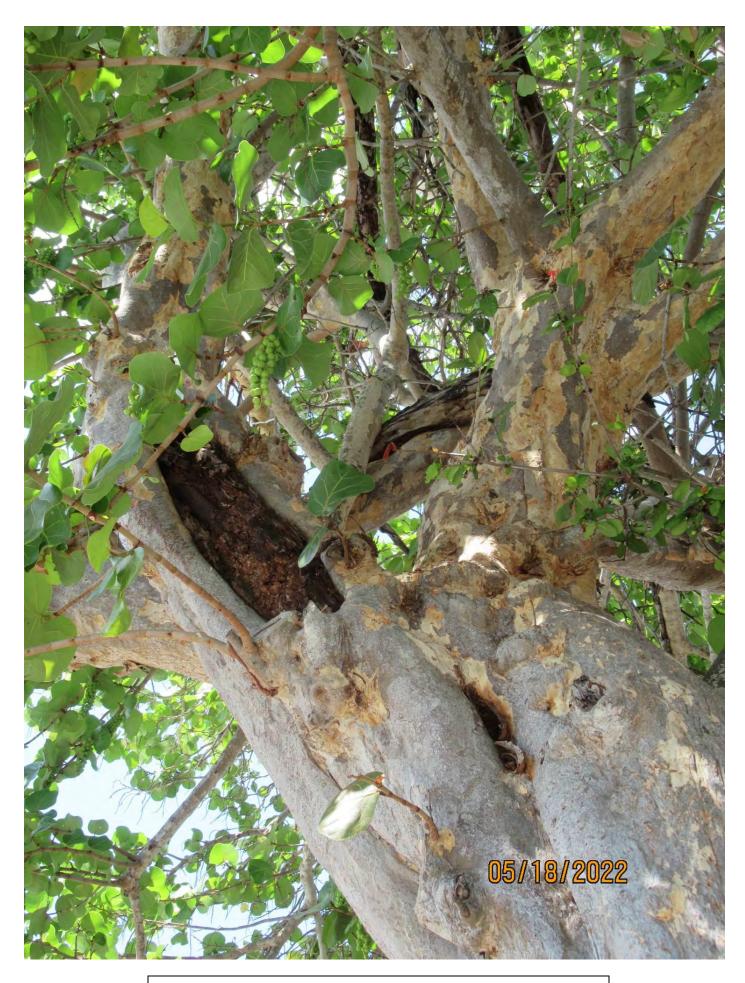


Photo of main tree trunks and tree canopy, view 3.



Close up photo of canopy showing branch tears and decay, view 1.



Close up photo of canopy showing branch tears and decay, view 2.

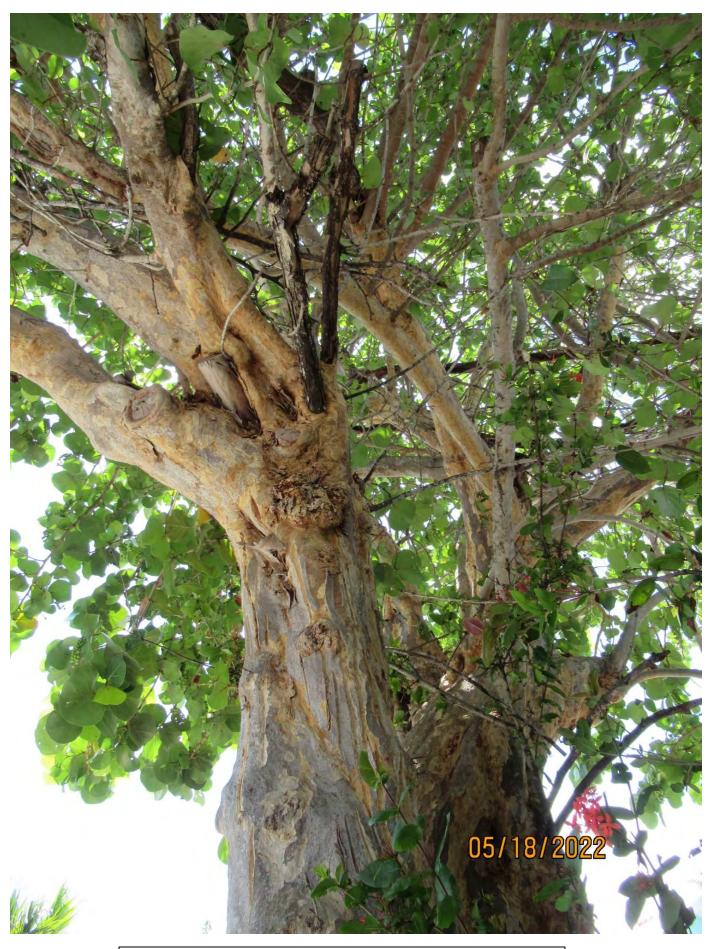


Photo of main trunk and canopy showing branch tears and decay.





Photos showing two different termite mud and frass areas.



Photo of termite mud in main trunk.

Diameter: 48.8"

Location: 60% (growing in front yard at property corner next to sidewalk.)

Species: 100% (on protected tree list)

Condition: 30% (overall condition is poor, decay throughout canopy and

main trunks, active termites, canopy lopsided and a mess)

Total Average Value = 63%

Value x Diameter = 30.7 replacement caliper inches

Application





ree remit Application	
Please Clearly Print All Inform	Date: 5-2-2022
The state of the s	ration amess indicated otherwise.
Tree Address 362	8 Tuck ave
Cross/Corner Street 19th	St.
List Tree Name(s) and Quantity Se	garage tree
Species Type(s) check all that apply () Palm	() Flowering (x) Fruit (x) Shade () Unsure
Reason(s) for Application:	
REMOVE (X) Tree Health (X) Safe	ety () Other/Explain below
() TRANSPLANT () New Location () Sa	ime Property () Other/Explain below
() HEAVY MAINTENANCE () Branch Removal ()	Crown Cleaning/Thinning () Crown Reduction
Additional Tree has failed	I may times and has had multiple
Information amountations It	stull of termites has lots of closer
and Explanation 15 tived of 14	te and wants to be reincounted as
	lee i
Property Owner Name Property Owner eMail Address	a Adkins
Dronowhy Oursey Mailing a 11	nevottenta Gmallo Com
Decrease O no see	8 Puckarei West State FC Zin 32001
	990-0399 State FC Zip 33010
Property Owner Signature	210 5/14
Poprocontative Name	W. Dari
Representative Name Representative eMail Address	nets king
Representative Mailing Address 1602	Lalakt.
Representative Mailing City	West State 12/ 7: 320/40
Representative Phone Number (3/4)	794 - 81A
NOTE: A Tree Representation Authorization form must	accompany this application if company other than the
owner will be representing the owner at a Tree Commiss	sion meeting or picking up an issued Tree Permit.
	Tree Representation Authorization form attached (
• The second of thee in this ar	ea including cross/corner Street >>>>
Please identify tree	(s) with colored tape
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If this process requires blocking of a City right-of-way, a separate ROW Permit is required. Please contact 305-809-3740.

tukare

Updated: 02/22/2014



Tree Representation Authorization

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. Date Tree Address **Property Owner Name Property Owner Mailing Address** Property Owner Mailing City, State, Zip **Property Owner Phone Number Property Owner email Address Property Owner Signature** Representative Name Representative Mailing Address Representative Mailing City, State, Zip Representative Phone Number Representative email Address 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 The forgoing instrument was acknowledged before me on this 20 day APRIL 2022 By (Print name of Affiant) TINA ADKINS who(is personally known to me or has produced as identification and who did take an oath. **Notary Public** Sign name: Print name: My Commission expires: Notary Public-State of (Seal) Votary Public State of Florida