

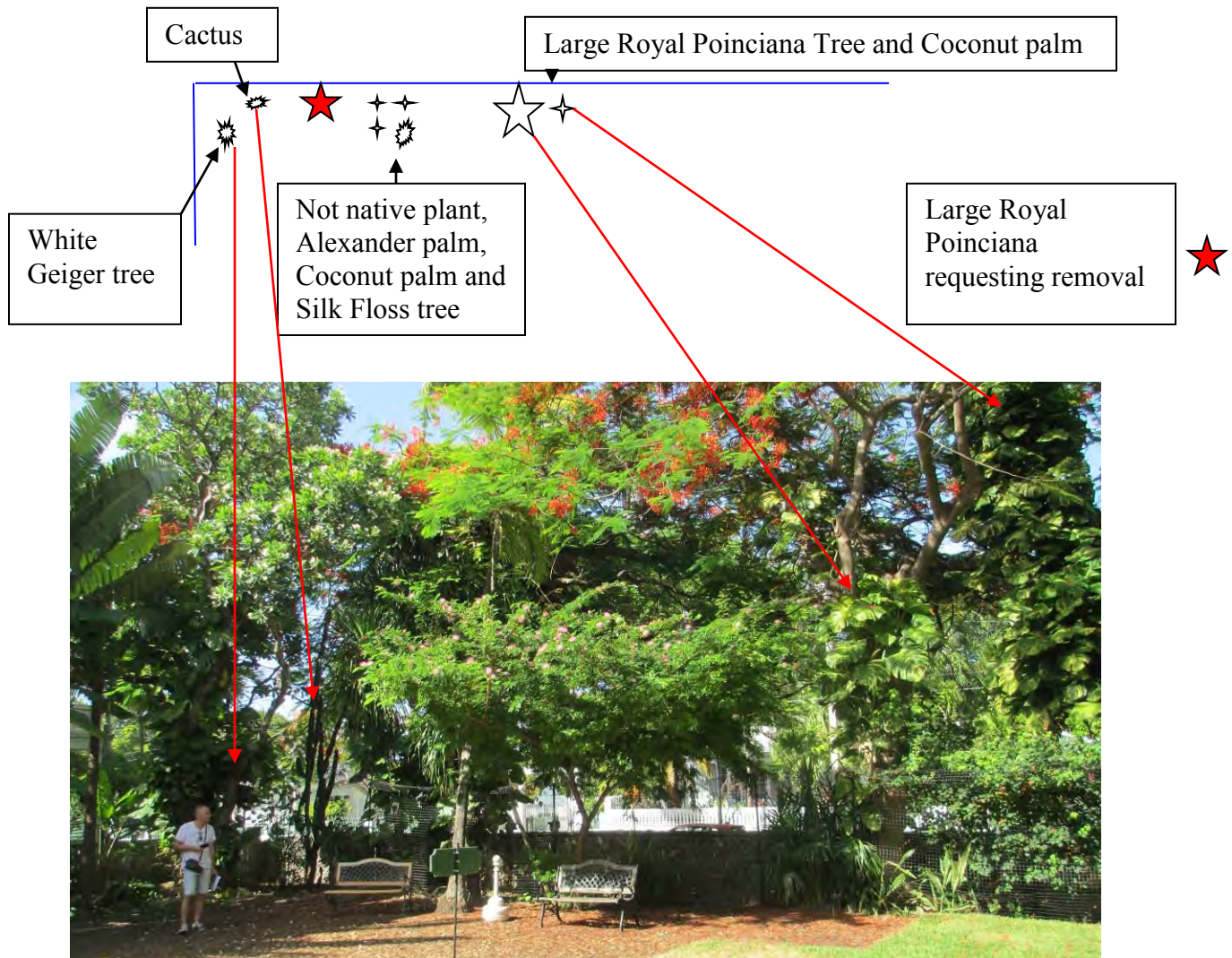
# STAFF REPORT

DATE: July 16, 2014

**RE: 907 Whitehead Street, Hemingway House  
(permit application #6970 )**

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

An application was received for the removal of **(1) Royal Poinciana tree**.  
A site inspection was done on July 10, 2014 and documented the following:



Tree Species: Royal Poinciana (Delonix regia)



Diameter: 24.5"

Location: 50% (very public/visible tree, grows over road)

Species: 100% (on protected tree list)

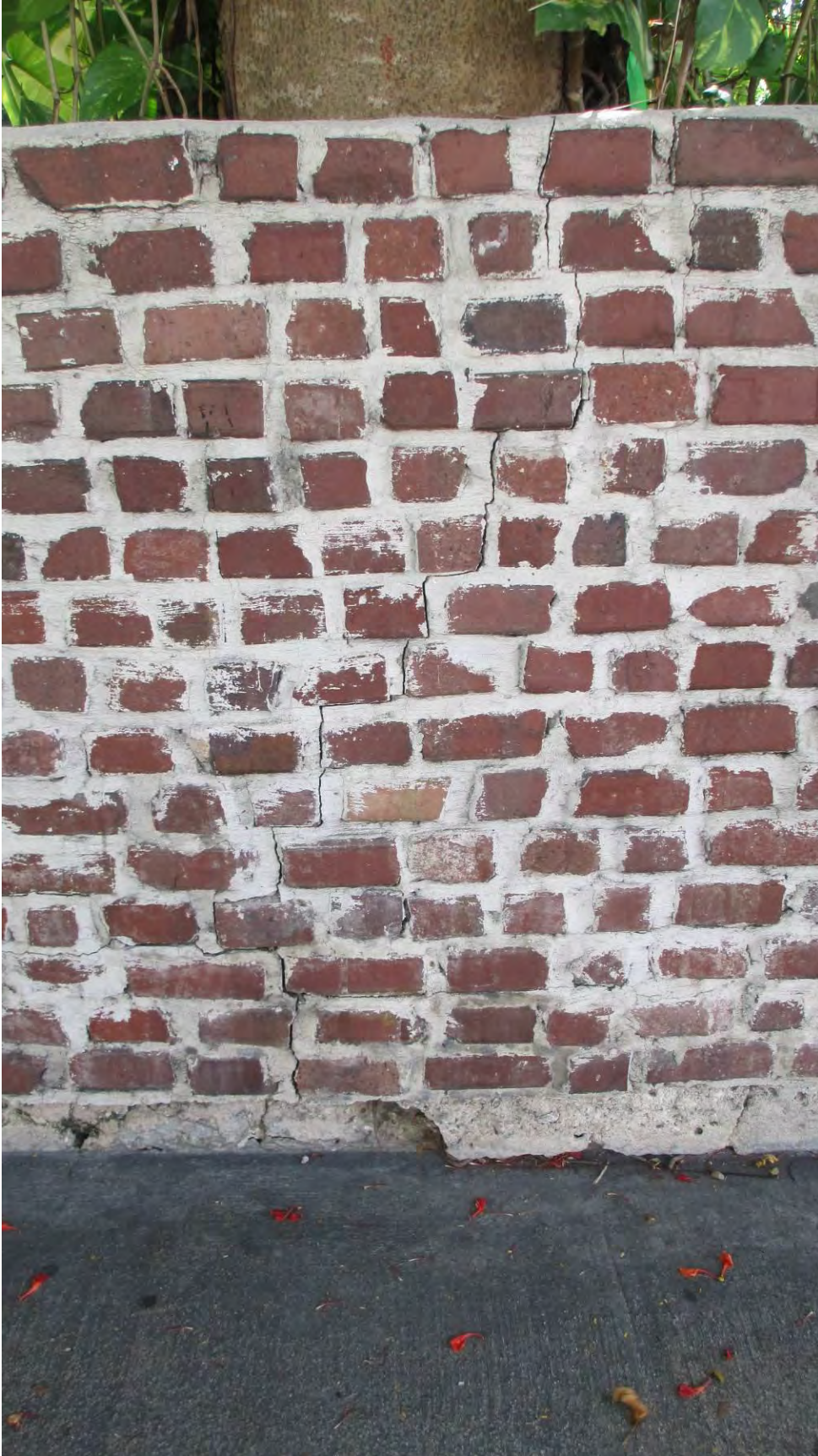
Condition: 60% (fair, strong lean toward sidewalk and road, healthy canopy)

Total Average Value = 70%

Value x Diameter = **17 replacement caliper inches**







Cracked, historic wall. According to HARC, wall was built in 1936.





Large buttress roots









Additional photos of yard:



# Application



TC  
August 2014  
WD

6970

## Tree Permit Application

Date: \_\_\_\_\_

Please Clearly Print All Information unless indicated otherwise.

**Tree Address** 907 Whitehead St Key West  
**Cross/Corner Street** WHITEHEAD AND CLIVIA STREETS  
**List Tree Name(s) and Quantity** (1) ONE ROYAL POINCIANA TREE  
**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** TREE REMOVAL AND REPLACE WITH ANOTHER TREE

**Reason for Request** TREE IS LEANING INTO HISTORIC BRICK WALL (1937) AND HAS CRACKED WALL AND WILL EVENTUALLY KNOCK WALL DOWN

**Property Owner Name** MICHAEL A. MURAWSKI  
**Property Owner eMail Address** hemingwayhome@TAMPABAY.RR.COM  
**Property Owner Mailing Address** 907 Whitehead St. KEY WEST FL 33040  
**Property Owner Mailing City** KEY WEST **State** FL **Zip** 33040  
**Property Owner Phone Number** (305) 304-1581 Cell WORK 305 214 1136  
**Property Owner Signature** Michael A. Murawski

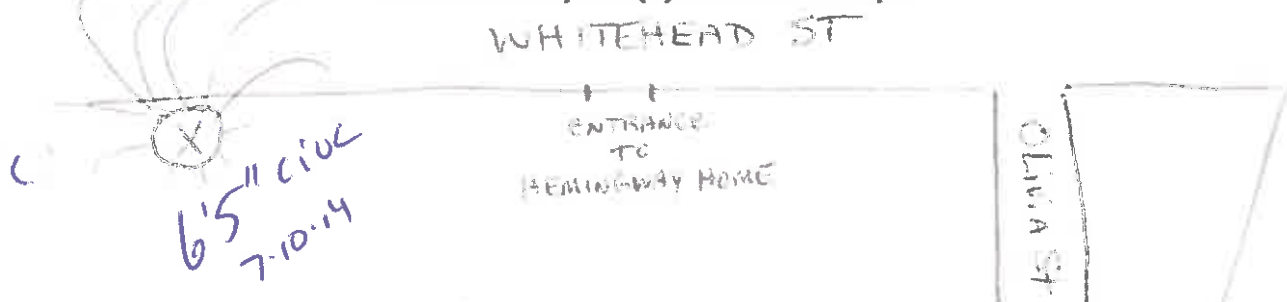
**Representative Name** LARRY BUSLOFF  
**Representative eMail Address** LARRYBUSLOFF@YAHOO.COM  
**Representative Mailing Address** 410 AVE C  
**Representative Mailing City** KEY WEST **State** FL **Zip** 33040  
**Representative Phone Number** (305) 304-1581

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 required. Please contact 305-809-3740.



6970

## Tree Representation Authorization

Date: JUNE 16, 14

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 907 WHITEHEAD ST

Property Owner Name HEMINGWAY HOME  
Property Owner eMail Address hemingwayhome@TAMPABAY.FL.COM  
Property Owner Mailing Address 907 WHITEHEAD ST  
Property Owner Mailing City KEY WEST State FL Zip 33040  
Property Owner Phone Number (305) 294-1136  
Property Owner Signature Michael A. Morawski

Representative Name LARRIE BUSLOFF  
Representative eMail Address LARRIEBUSLOFF@YAHOO.COM  
Representative Mailing Address 410 AV "C"  
Representative Mailing City K.W. State FL Zip 33040  
Representative Phone Number (305) 304-1581

I MICHAEL A. MORAWSKI, 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 Michael A. Morawski

The forgoing instrument was acknowledged before me on this 17 day of JUNE 2014

By (Print name of Affiant) Michael A. Morawski who is personally known to me or has produced N/A as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Dave L. Gonzales Jr.

Print Name: DAVE L. GONZALES JR.

My Commission Expires: Nov 26 2015

Notary Public - State of Florida (seal)

