

# STAFF REPORT

DATE: November 14, 2014

**RE: 1614 South Street (permit application # 7153)**

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

An application was received for the removal of **(1) Strangler Fig tree**. A site inspection was done on November 14, 2014 and documented the following:

Tree Species: Strangler Fig (*Ficus aurea*)























Diameter: 46.5"

Location: 20% (issues with house—growing into foundation and against roof corners)

Species: 100 % (on protected tree list)

Condition: 60 % (fair)

Total Average Value = 60%

Value x Diameter = **27 replacement caliper inches**

**Recommendations: Recommend approval of the removal of (1) Strangler Fig tree located at 1614 South Street, to be replaced with 27 caliper inches of FL#1 native dicot or fruit tree.**



# Application



7152 - Palm

7153 - canopy

## Tree Permit Application

Date: 11/10/2014

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1614 South St Key West  
Cross/Corner Street Ashby & South  
List Tree Name(s) and Quantity Royal Palm (triple stem) ARALIA (Strangler Fig)  
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 \_\_\_\_\_

Reason for Request TREES ARE CAUSING damage to pool  
and Foundation concerns

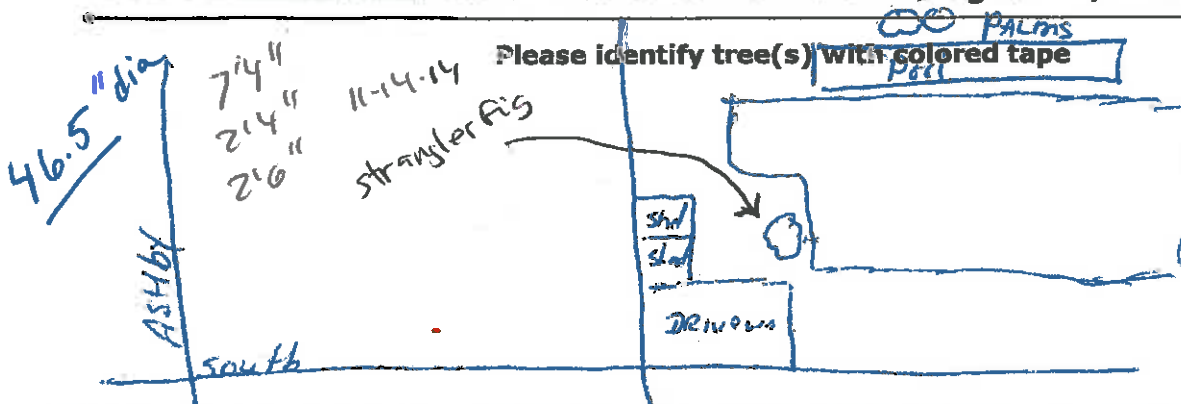
Property Owner Name DONALD Bly  
Property Owner eMail Address dnably@att.net  
Property Owner Mailing Address 1614 South St  
Property Owner Mailing City Key West State FL Zip 33040  
Property Owner Phone Number (305) 569-1443  
Property Owner Signature D. Bly

Representative Name \_\_\_\_\_  
Representative eMail Address \_\_\_\_\_  
Representative Mailing Address \_\_\_\_\_  
Representative Mailing City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Representative Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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 >>>>>



See attached drawing

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



Ashby Rd

South

Drive  
WAY

Archeia →

SPA

Fence  
OO Royal Pines  
Damage to Pool

House

1614 South

