

# STAFF REPORT

DATE: January 26, 2015

**RE: 729 United Street ROW-William Street (permit application #7227)**

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

An application was received for the removal of **(1) Sandbox tree**. A site inspection was done on November 5, 2014 and January 7, 2015 and documented the following:

Tree Species: Sandbox (*Hura crepitans*)



Diameter: 26.8"

Location: 60% (impacting utility lines, roots impacting neighboring private property)

Species: 50% (not on protected or not protected tree list)

Condition: 10% (very poor-dying)

Total Average Value = 40%

Value x Diameter = **10.7 replacement caliper inches**











Wasp/Bee hive in tree





**Recommendations: Recommend approval of the removal of (1) Sandbox tree located at 729 United Street ROW-William Street, to be replaced with 10.7 caliper inches of FL#1 native dicot or fruit trees.**

# Application



February  
TC  
meeting

7227

## Tree Permit Application

Date: 1-20-15

Please Clearly Print All Information unless indicated otherwise.

Tree Address 729 United Row (William St)  
Cross/Corner Street \_\_\_\_\_  
List Tree Name(s) and Quantity 1- Sandbox 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 is in very poor health. Also has  
a wasp or bee nest in it. Lots of branches  
Reason for Request Fall off - hazard to vehicles + pedestrians

Property Owner Name City of Key West  
Property Owner eMail Address \_\_\_\_\_  
Property Owner Mailing Address PO Box 1409  
Property Owner Mailing City Key West State FL Zip 33041  
Property Owner Phone Number ( ) - -  
Property Owner Signature \_\_\_\_\_

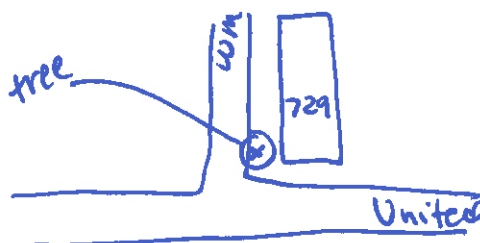
Representative Name Karen Delania  
Representative eMail Address \_\_\_\_\_  
Representative Mailing Address Urban Forester  
Representative Mailing City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Representative Phone Number (305) 809-3768

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 ( )

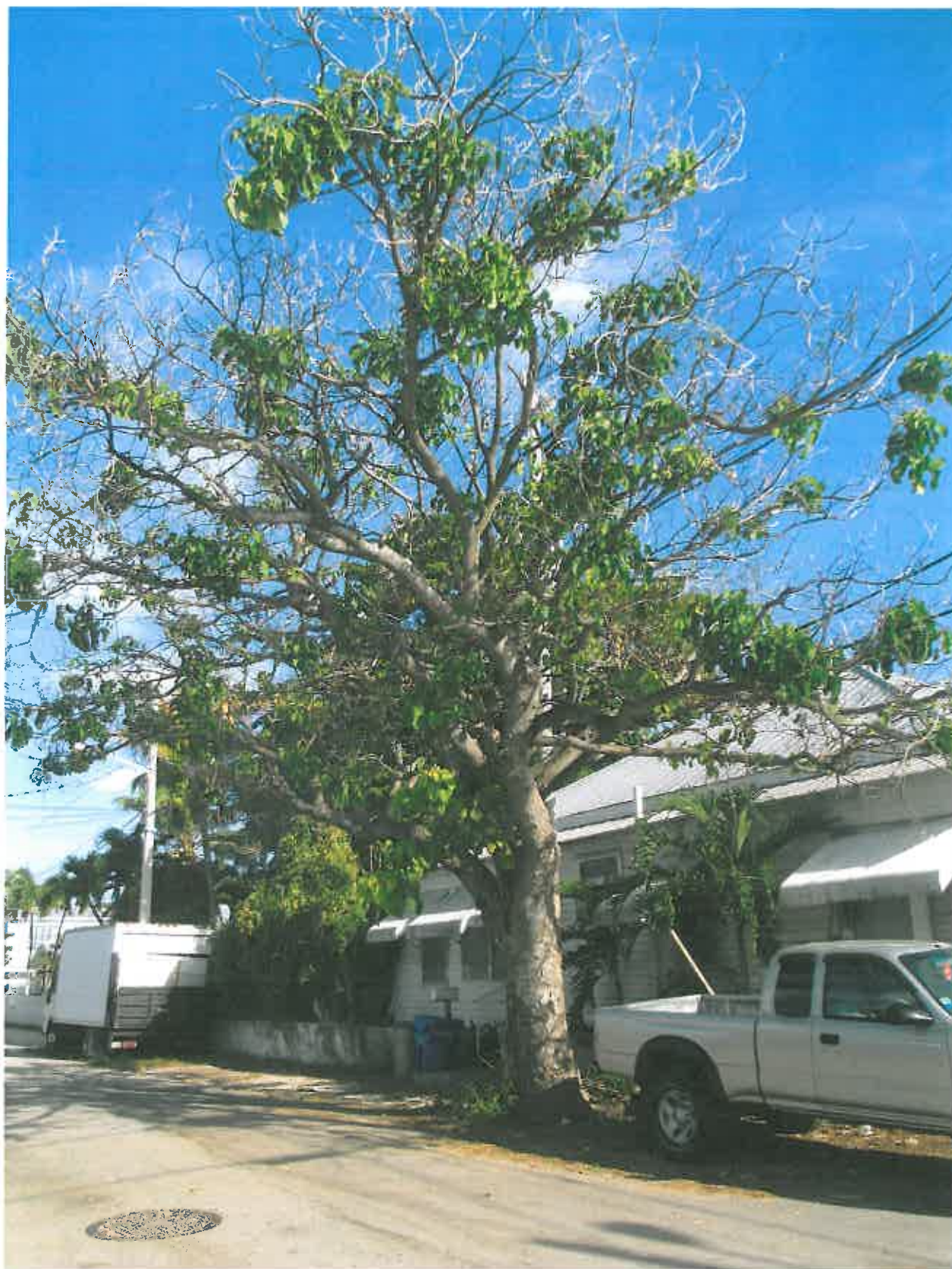
<<<<< Sketch location of tree in this area including cross/corner Street >>>>>

Please identify tree(s) with colored tape



11-5-14  
7' circ  
26.8" dbh

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



Photos taken 11-4-14: tree in poor health, canopy void of leaves, numerous dead branches.



Bee/wasp hive  
in here



