

# STAFF REPORT

DATE: April 28, 2015

RE: **700 Eaton Street (permit application #7377)**

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

An application was received for the removal of **(1) Jacaranda tree and (4) Surinam Cherry trees**. A site inspection was done on April 13, 2015 and documented the following:

Tree Species: Jacaranda (*Jacaranda mimosifolia*)



















Diameter: 9.5"

Location: 60% (canopy into utility lines)

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

Condition: 30% (poor-heavy lean toward road, decay area in main trunk)

Total Average Value = 46%

**Value x Diameter = 4.4 replacement caliper inches**



Tree Species: Surinam Cherry (*Eugenia uniflora*)



Cherry  
#1

Cherry #3

Cherry #2



Cherry  
#4



Cherry #1:



Diameter: 8"

Location: 60%

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

Condition: 60%

Total Average Value = 56%

Value x Diameter = **4.4 replacement caliper inches**



Cherry #2:



Diameter: 8.5"

Location: 60%

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

Condition: 60%

Total Average Value = 56%

Value x Diameter = **4.7 replacement caliper inches**



### Cherry #3:



Diameter: 7"

Location: 60%

Species: 100% (not on protected or not protected tree list)

Condition: 60%

Total Average Value = 56%

Value x Diameter = **3.9 replacement caliper inches**



Cherry #4:



Diameter: 6"

Location: 60%

Species: 100% (not on protected or not tree list)

Condition: 60%

Total Average Value = 56%

Value x Diameter = **3.3 replacement caliper inches**



Tree#1 replacement inches: 4.4" (Jacaranda)

Tree#2 replacement inches: 4.4"

Tree#3 replacement inches: 4.7"

Tree#4 replacement inches: 3.9"

Tree#5 replacement inches: 3.3"

TOTAL: 20.7"



# Application





7377

## Tree Permit Application

Date: 4/13/15

Please Clearly Print All Information unless indicated otherwise.

Tree Address 700 Eaton St.  
Cross/Corner Street Eaton + Elizabeth  
List Tree Name(s) and Quantity Jacaranda x 1 and cherry trees x 4  
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 need to remove for new construction  
and will replace as required by

Reason for Request tree commission

Property Owner Name Poinciana Partners, LLC; Jessica Johnson, member  
Property Owner eMail Address jessica.johnson@yahoo.com  
Property Owner Mailing Address 601 Amalfi Drive  
Property Owner Mailing City Pacific Palisades State CA Zip 90272  
Property Owner Phone Number (310) 770-4793  
Property Owner Signature [Signature]

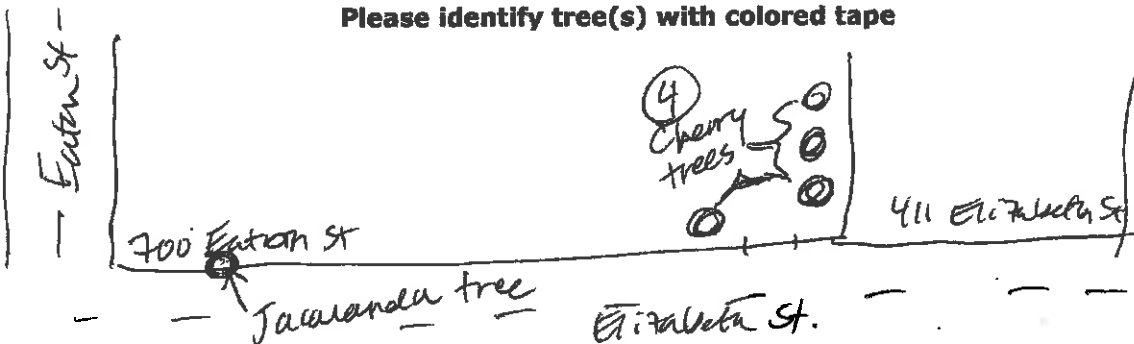
Representative Name Nicholas Dawns  
Representative eMail Address acaring-tree-company@gmail.com  
Representative Mailing Address 19264 Acosta Trail  
Representative Mailing City Sugarloaf Key State FL Zip 33042  
Representative Phone Number (305) 432-1744

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.





## Tree Representation Authorization

Date: 3/31/15

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 700 Eaton Street

Property Owner Name Poinciana Partners, LLC

Property Owner eMail Address jessicabjohnson@yahoo.com

Property Owner Mailing Address 1601 Amalfi Drive

Property Owner Mailing City Pacific Palisades State CA Zip 90272

Property Owner Phone Number (310) 770-4793

Property Owner Signature John / Michael Downer / Members

Representative Name Nicholas Downer

Representative eMail Address acanytreecompany@gmail.com

Representative Mailing Address 19264 Acosta Trail

Representative Mailing City Sugarland Key State FL Zip 33042

Representative Phone Number (305) 432-1764

I Michael Downer, Member, Poinciana Partners, LLC, 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 if there is any questions or need access to my property.

Property Owner Signature Michael Downer, Member

The foregoing instrument was acknowledged before me on this 31<sup>st</sup> day of March.

By (Print name of Affiant) Michael Downer who is personally known to me or has produced \_\_\_\_\_ as identification and who did take an oath.

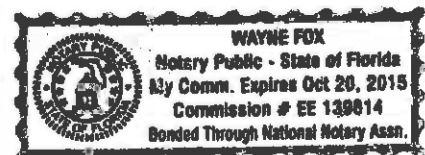
### NOTARY PUBLIC

Sign Name: Wayne Fox

Print Name: Wayne Fox

My Commission Expires: 10/20/15

Notary Public - State of Florida (seal)







## Tree Representation Authorization

Date: 04/13/15

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 700 Eaton St.

Property Owner Name Poinciana Partners, LLC / Jessica Johnson  
Property Owner eMail Address jessica.bjohnson@yahoo.com *Member*  
Property Owner Mailing Address 601 Anafiki Drive  
Property Owner Mailing City Pacific Palisades State CA Zip 90272  
Property Owner Phone Number (310) 770-4793  
Property Owner Signature [Signature]

Representative Name Michael Herrera  
Representative eMail Address freedomistfun@aol.com  
Representative Mailing Address 3831 Duck Ave  
Representative Mailing City Key West State FL Zip 33040  
Representative Phone Number (602) 424-6923

I Jessica Johnson, Member Poinciana Partners, LLC, 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 [Signature]

The forgoing instrument was acknowledged before me on this 13 day April.

By (Print name of Affiant) Jessica Johnson who is personally known to me or has produced \_\_\_\_\_ as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: [Signature]

Print Name: Wayne Fox

My Commission Expires: 10/20/15

Notary Public - State of Florida (seal)

