

STAFF REPORT

DATE: April 29, 2015

RE: **700 Elizabeth Street (permit application #7386)**

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

An application was received for the removal **of (1) Avocado tree**. A site inspection was done on April 24, 2015 and documented the following:

Tree Species: Avocado (*Persea americana*)




















NO PARKING
UNAUTHORIZED
VEHICLES WILL BE
TOWED AWAY
AT VEHICLE
OWNERS EXPENSE
CITY OF MIAMI

Diameter: 14.6"

Location: 60%

Species: 100% (on protected tree list)

Condition: 30% (strong lean toward neighboring property, lots of decay throughout tree)

Total Average Value = 63%

Value x Diameter = 9 replacement caliper inches

Recommendations: Recommend approval of the removal of (1) Avocado tree located at 700 Elizabeth Street, to be replaced with 9 caliper inches of FL#1 trees from the approved list.

Application



7386

Tree Permit ApplicationDate: 4-22-2015**Please Clearly Print** All Information unless indicated otherwise.

Tree Address 700 Elizabeth St
Cross/Corner Street Angela St
List Tree Name(s) and Quantity 1 Avocado
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 _____

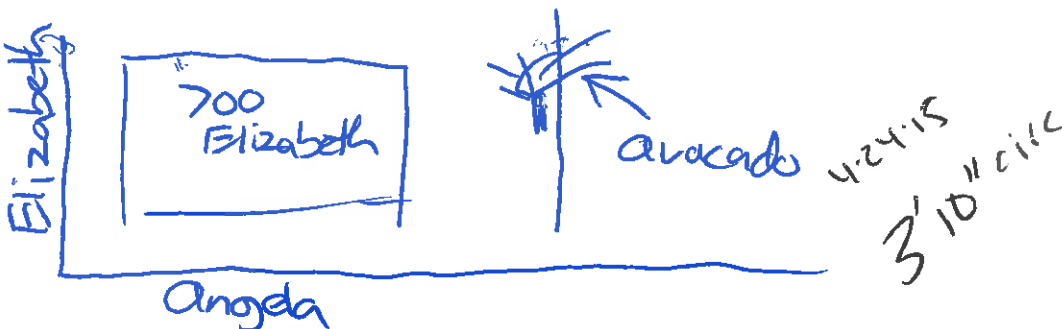
Reason for Request Tree is infested with termites. Has dropped
1 limbs in the past

Property Owner Name Chip Edwards
Property Owner eMail Address _____
Property Owner Mailing Address 700 Elizabeth St
Property Owner Mailing City Key West **State** FL **Zip** 33040
Property Owner Phone Number (305) 240-1738
Property Owner Signature _____

Representative Name Kenneth Kly
Representative eMail Address _____
Representative Mailing Address 1602 Loid
Representative Mailing City Key West **State** FL **Zip** 33040
Representative Phone Number (305) 296-8101

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: April 22, 2015

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 7100 Elizabeth St
Property Owner Name Robert A. Edwards trustee
Property Owner eMail Address ADFabKeyWest@AOL.com
Property Owner Mailing Address 7100 Elizabeth
Property Owner Mailing City Same State FL Zip 33040
Property Owner Phone Number (305) 240-1738
Property Owner Signature Robert A. Edwards, Trustee
Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Laird
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 296-8101

I _____, 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 Robert A. Edwards, Weentrant Trust

The forgoing instrument was acknowledged before me on this 22nd day April, 2015

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

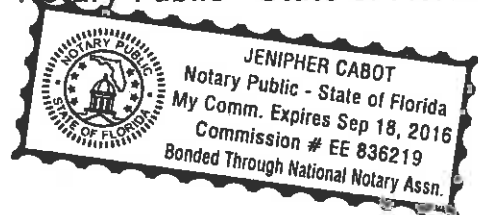
NOTARY PUBLIC

Sign Name: Jenipher Cabot

Print Name: JENIPHER CABOT

My Commission Expires: 9/18/16

Notary Public - State of Florida (seal)



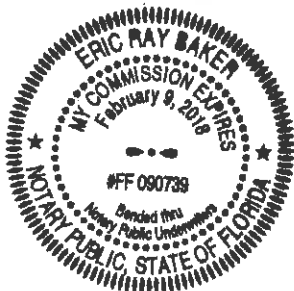
12/16/2014

To whom it may concern, I authorize Robert Edwards who resides at 700 Elizabeth St. to pull any permit from the City for work that is to be done at the above property

Byron Weintraub

Byron Weintraub, Owner

Robert A. Edwards



Eric Baker
Eric Baker
EXP 2-9-18