STAFF REPORT

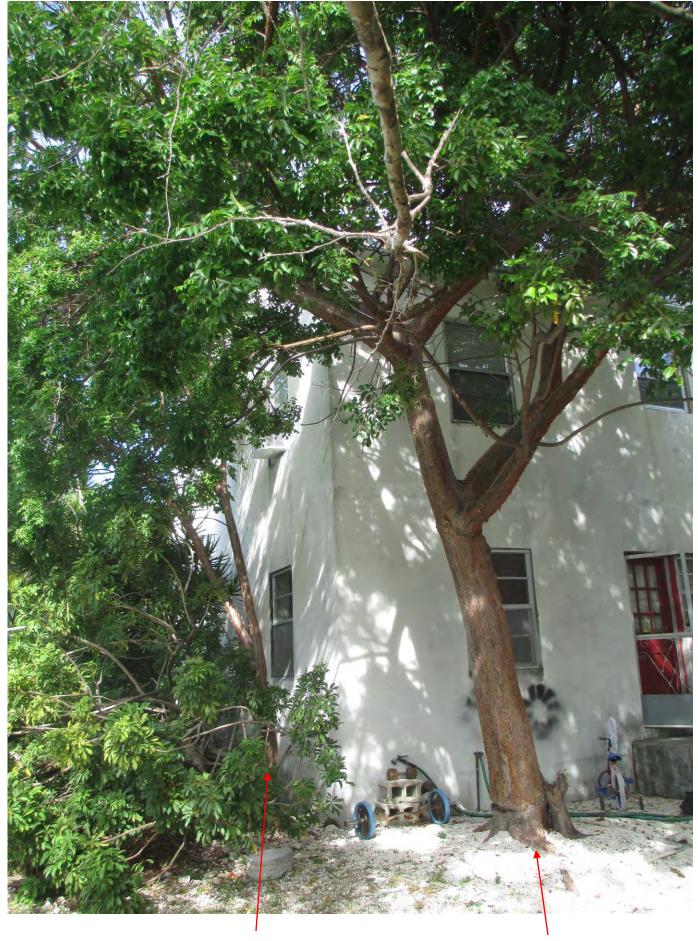
DATE: June 25, 2015

RE: 1312 William Street (permit application # T15-7479)

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

An application was received for the removal of (2) Gumbo Limbo trees. A site inspection was done on June 25, 2015 and documented the following:



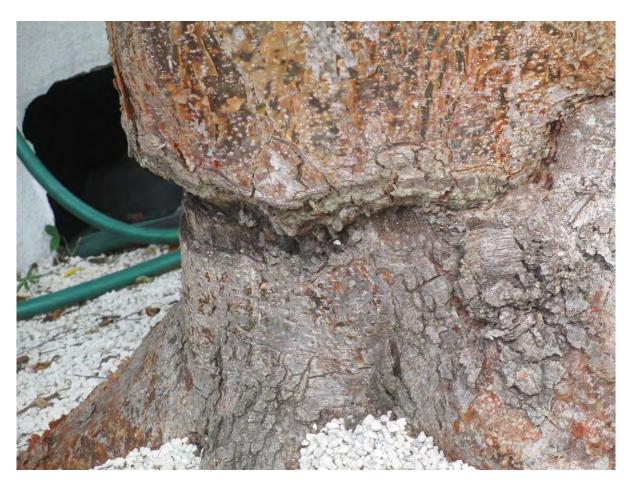


Tree #2 Tree #1

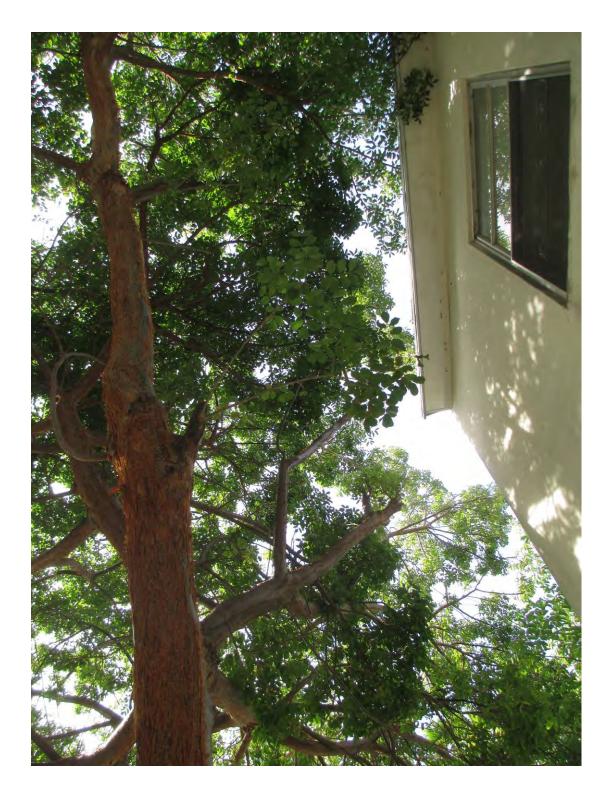
Tree #1:











Diameter: 14.9"

Location: 60% (close to side of house-impacts canopy)

Species: 100% (on protected tree list)

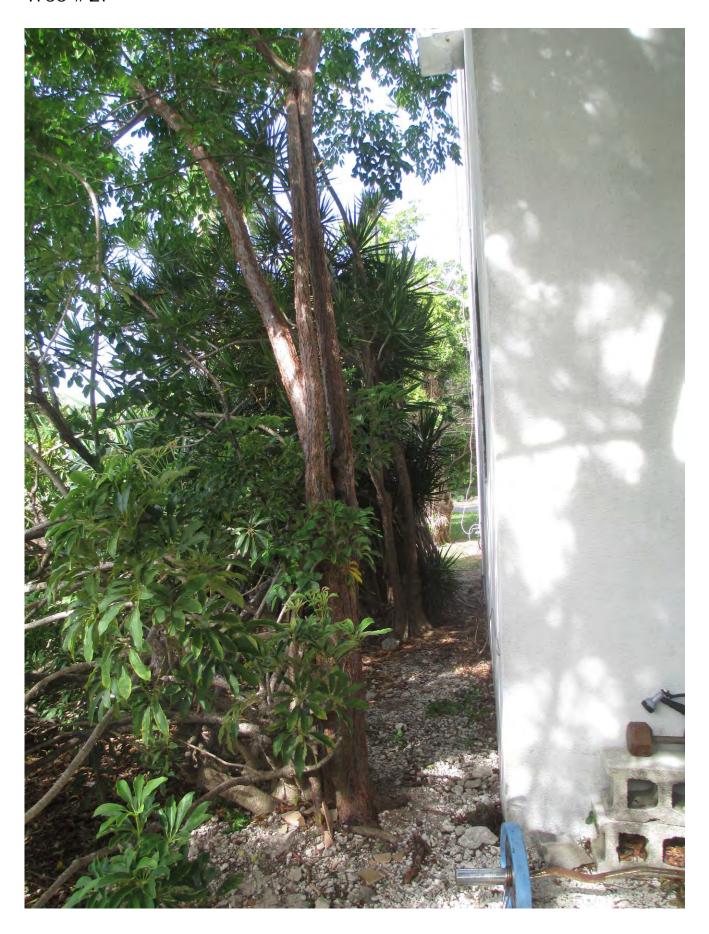
Condition: 50% (main trunk damage encircles trunk-creates weak area, on

sided canopy)

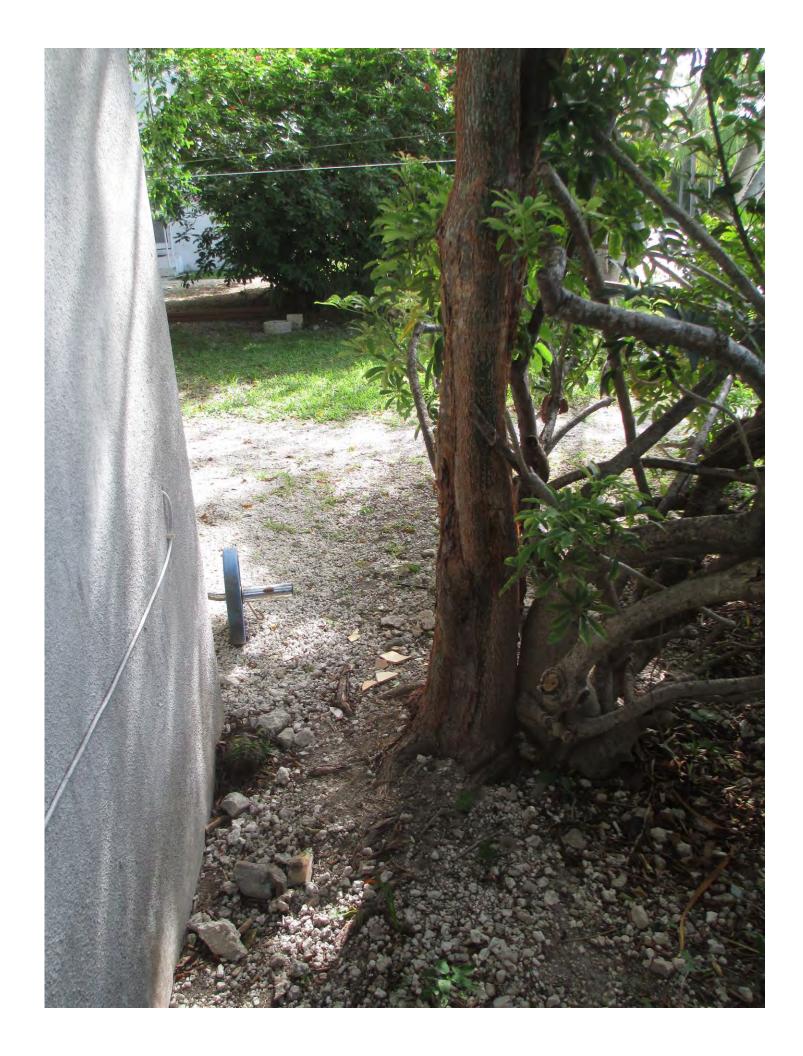
Total Average Value = 70%

Value x Diameter = 10.4 replacement caliper inches

Tree #2:









Diameter: 12" (multi-trunked)

Location: 40% (too close to house-wrong tree, wrong place)

Species: 100% (on protected tree list)

Condition: 50% (structure poor, co-dominant trunk)

Total Average Value = 63%

Value x Diameter = 7.5 replacement caliper inches

Replacements:

Tree #1: 10.4" Tree #2: 7.5" TOTAL = 17.9"

Application



required. Please contact 305-809-3740.

Updated: 02/22/2014



7479

Please Clearly Print All Information unless indicated otherwise. Tree Address Cross/Corner Street List Tree Name(s) and Quantity Species Type(s) check all that apply () Palm () Flowering () Fruit (x) 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 _____ (Loots are causing Musblems because Reason for Request **Property Owner Name Property Owner eMail Address** Property Owner Mailing Address Johnsonst **Property Owner Mailing City** State / Property Owner Phone Number (ファン) **Property Owner Signature** Representative Name Representative eMail Address Representative Mailing Address Representative Mailing City State 7 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 >>>> with colored tape 132 Willow If this process requires blocking of a City right-of-way a separate ROW Permit is







Tree Representation Authorization

Date: 6/20/15

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	1321 William Street
Property Owner Name Property Owner eMail Address Property Owner Mailing Address Property Owner Mailing City Property Owner Phone Number Property Owner Signature	N. Solita Robinson/ N.R. Morgan asanrm @ bell south, net 1012 Johnson Freet Key West State 19 Zip 33040 (172)538 - 1442. X Johnson Robinson
Representative Name Representative eMail Address Representative Mailing Address Representative Mailing City Representative Phone Number	Kennak King 1602 Laird St. Kas Wasi State FX Zip 33040 (308) 296 - 810
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	Solla Robenson
The forgoing instrument was acknowled	dged before me on this2015
By (Print name of Affiant) N. Solika Robinson who is personally known to me or has produced as identification and who did take an oath.	
NOTARY PUBLIC Sign Name:	Notary Public - State of Florida (seal) JENNIFER L. SIEGLER NOTARY PUBLIC STATE OF FLORIDA Commit EE105675 Expirem 4/20/2016