

STAFF REPORT

DATE: August 25, 2015

RE: **603 Elizabeth Street (permit application # T15-7558)**

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

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

1. Tree Species: Royal Poinciana (Delonix regia)



















Diameter: 38.8" (three trunks all connected by one root ball/system)

Location: 65% (tree competing for canopy space with adjacent mahogany and royal Poinciana trees)

Species: 100% (on protected tree list)

Condition: 30% (poor-termites in root system, major decay in one trunk, all trunks poor structure)

Total Average Value = 65%

Value x Diameter = 25 replacement caliper inches

Recommendation: Recommend approval of the removal of one (1) Royal Poinciana tree at 603 Elizabeth Street to be replaced with 25 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted onsite.

Application



7558

Tree Permit Application

Date: 8-19-15

Please Clearly Print All Information unless indicated otherwise.

Tree Address 603 Elizabeth
 Cross/Corner Street Simonton, St Elizabeth
 List Tree Name(s) and Quantity 1 - Royal Poinciana
 Species Type(s) check all that apply () Palm () Flowering () Fruit () Shade () Unsure
 Reason(s) for Application:

(X) REMOVE () Tree Health (X) Safety () Other/Explain below Possible Emergency
 () TRANSPLANT () New Location () Same Property () Other/Explain below
 () HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction
 Other/Explain This tree has several areas of decay. 1 large limb came down last week
 Reason for Request

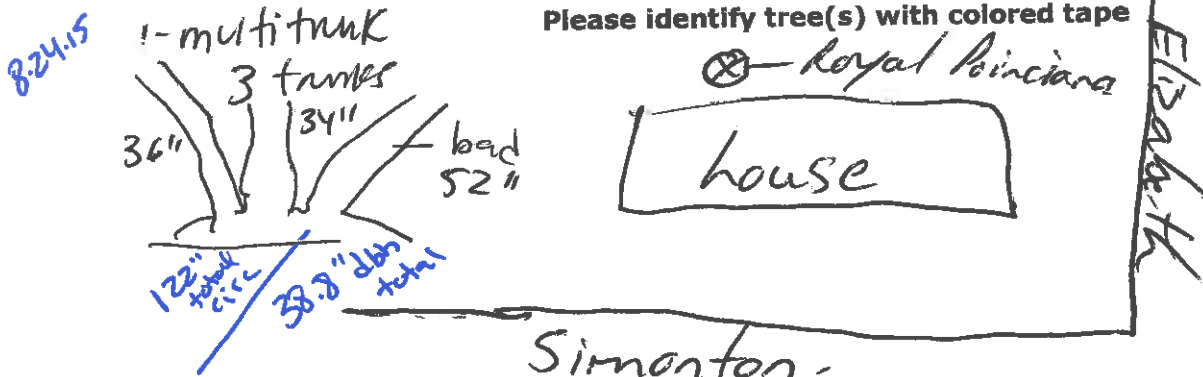
Property Owner Name KDC Properties of Key West
 Property Owner eMail Address EKW INC @ comcast.net
 Property Owner Mailing Address P.O. Box 4725 KW FL
 Property Owner Mailing City Key West State FL Zip 33041
 Property Owner Phone Number
 Property Owner Signature [Signature]

Representative Name Just Keys Trees, Inc
 Representative eMail Address justkeystrees@comcast.net
 Representative Mailing Address 5550 5th Ave Suite 6
 Representative Mailing City Key West State FL Zip 33040
 Representative Phone Number (305) 735-4656

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 >>>>>



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



7558

Tree Representation AuthorizationDate: 8-19-15

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 603 Elizabeth

Property Owner Name KDC PROPERTIES OF KEY WEST, LLC
Property Owner eMail Address KW.INCO@COMCAST.NET
Property Owner Mailing Address P.O. BOX 4125 KEY WEST, FL
Property Owner Mailing City State FL Zip 33041
Property Owner Phone Number _____
Property Owner Signature Carolyn A. Blackwell

Representative Name Just Keys Trees, Inc
Representative eMail Address justkeystrees@comcast.net
Representative Mailing Address 5550 5th Ave Suite 6
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 735-4656

I CAROLYN A. Blackwell, 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 are any questions or need access to my property.

Property Owner Signature Carolyn A. Blackwell

The forgoing instrument was acknowledged before me on this 19th day August.

By (Print name of Affiant) CAROLYN A. Blackwell who is personally known to me or has produced _____ as identification and who did take an oath.

NOTARY PUBLICSign Name: Becky D. Hernandez Bauer

Notary Public - State of Florida (seal)

Print Name: Becky D. Hernandez-Bauer

My Commission Expires: _____

