STAFF REPORT

DATE: November 18, 2015

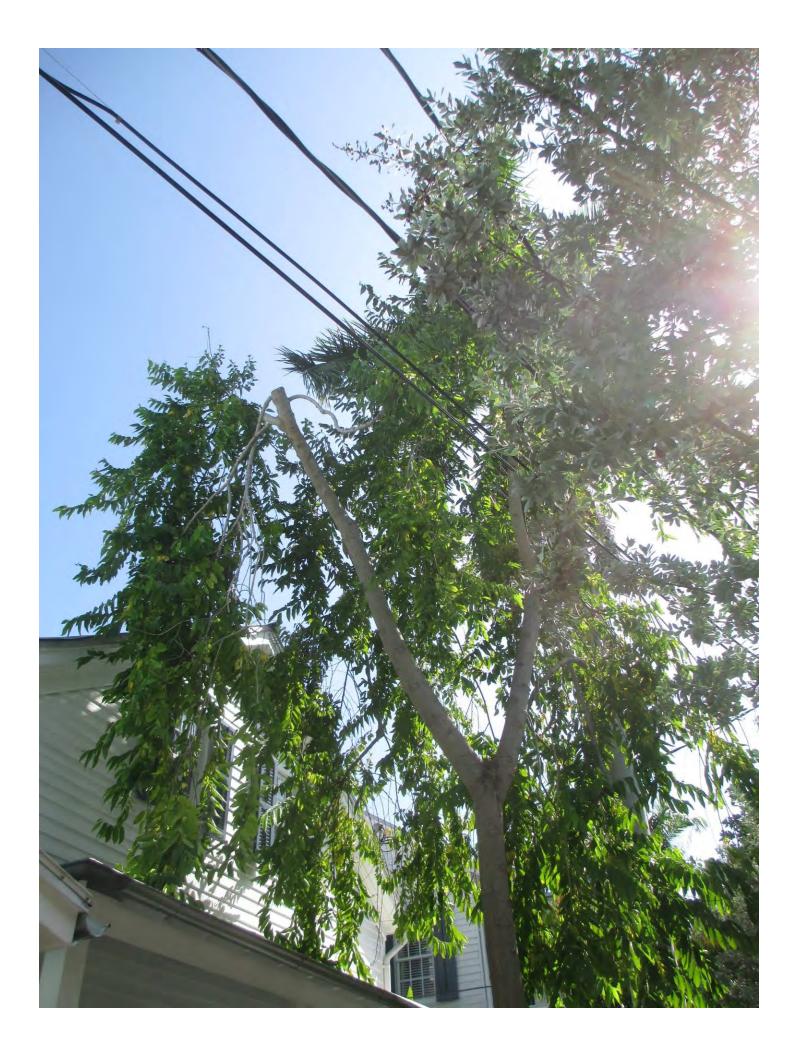
RE: 600 Fleming Street (permit application # T15-7681)

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

An application was received for the removal **of (1) Ylang Ylang tree**. A site inspection was done on November 18, 2015 and documented the following:

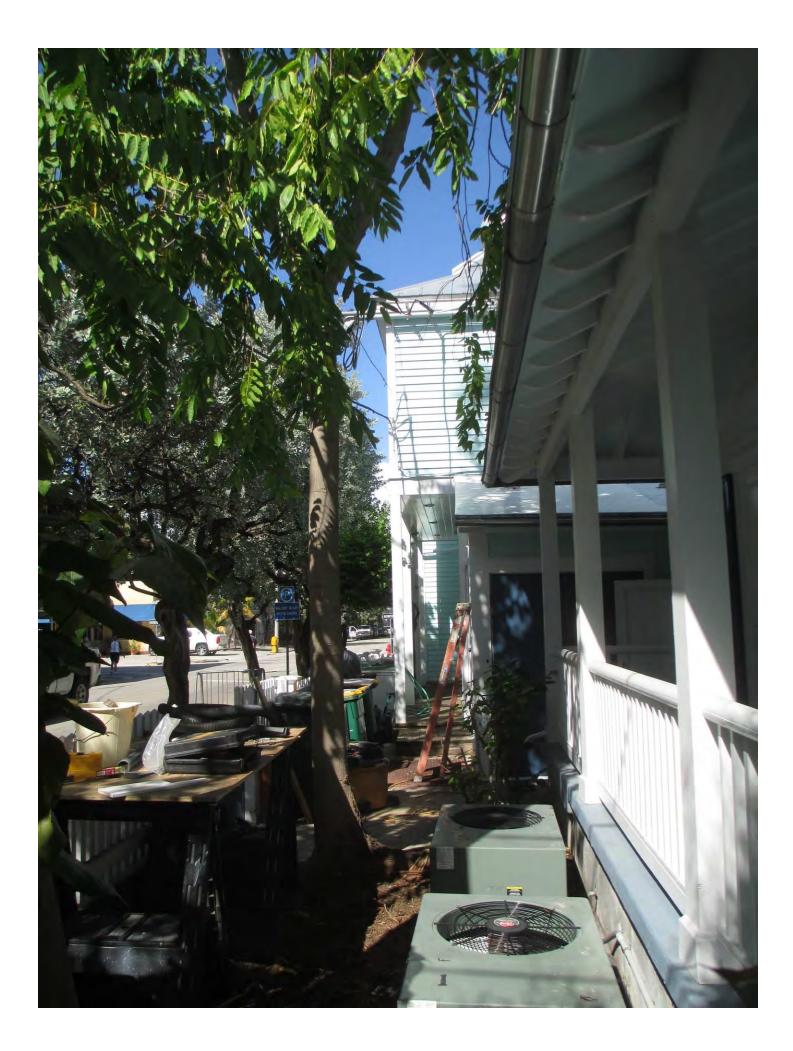
Tree Species: Ylang Ylang (Canaga odorata)

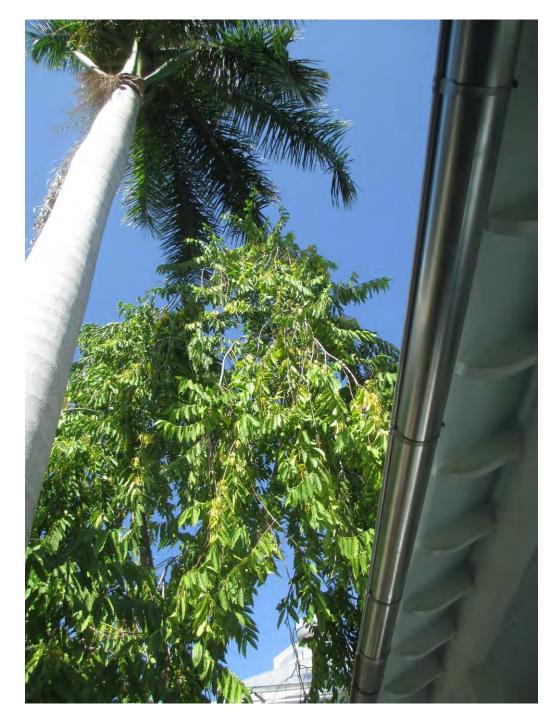












Diameter: **8.5**" Location: 50% (issues with access sidewalk, utility lines) Species: 50% (not on protected or not protected tree list) Condition: 60% (fair) Total Average Value = 53% **Value x Diameter = 4.5 replacement caliper inches**

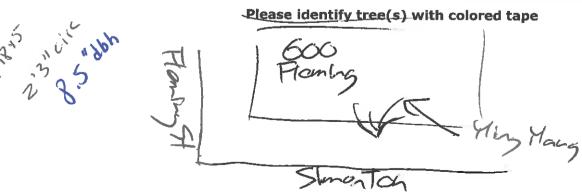
Recommendation: Recommend approval of the removal of one (1) Ylang Ylang tree at 600 Fleming Street to be replaced with 4.5 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted onsite.

Application

Image: Section of the section of th	
Tree Address 600 Flenhast.	
Cross/Corner Street <u>Smin to GP</u> . List Tree Name(s) and Quantity <u>Ying Yigng</u>	
pecies Type(s) check all that apply () Palm (X flowering () Fruit () Shade () Unsure	
eason(s) for Application:	
REMOVE () Tree Health () Safety (NOther/Explain below	
() TRANSPLANT () New Location () Same Property () Other/Explain below	
) HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction	
Other/Explain Tree 15 to close to building	
Reason for Request	
Property Owner Name Inter Ocean Holdha DBA Marginesa Hote	
Property Owner eMail Address Rman 71349 @ do	- 4
roperty Owner Mailing Address	
Property Owner Mailing City <u>Kar West</u> State <u>FK</u> Zip <u>33040</u> Property Owner Phone Number (2059 304 - 0698	
Property Owner Signature	
Representative Name Konneh Kha	
Representative eMail Address	
Representative Mailing Address 607 Later State FC Zip 3300	
Representative Mailing City $\underline{120}$ West State FC Zip $\overline{32000}$	

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 () **Second Stree 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.

Updated: 02/22/2014



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

Property Owner Name **Property Owner eMail Address Property Owner Mailing Address Property Owner Mailing City Property Owner Phone Number Property Owner Signature**

Representative Name Representative eMail Address Representative Mailing Address Representative Mailing City Representative Phone Number

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RMANTI349 e AU 1109 FLATON ST IN	OL .
Key West St	tate <u>FL</u> Zip <u>33040</u>
(305) 304 - 0698	Λ
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The state of the s	

_1602 Laika 31.	·			
1/201 WBT (305) 296- 3101		R	Zip	33010
(-707) -2-10 - 210				

Ι , hearby 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

The forgoing instrument was acknowledged before me on this _____ day _OCTOBEL___

By (Print name of Affiant) <u>ZICHARO</u>	MANLEY who is personally known to me or ha	as
produced	as identification and who did take an oath.	

NOTARY PUBLIC	
Sign Name: Nay a Quile	Notary Public - State of Florida (seal)
Print Name: STACY A ACUILAR	
My Commission Expires: <u>12-Lo-llo</u>	MY COMMISSION # EE856673 EXPIRES: December 06, 2016
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