

STAFF REPORT

DATE: December 10, 2015

RE: **617 Ashe Street (permit application # T15-7687)**

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

An application was received for requesting the potential removal of **(1) Ylang Ylang tree**. A site inspection was done on December 2, 2015 and documented the following:

Tree Species: Ylang Ylang (*Cananga odorata*)









Diameter: 11.7"

Location: 60%

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

Condition: 60% (fair-canopy misshaped)

Total Average Value = 56%

Value x Diameter = 6.5 replacement caliper inches

Recommendation: Recommend approval of the removal of one (1) Ylang Ylang tree at 617 Ashe Street to be replaced with 6.5 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted onsite.

Application



remove 7687
Lang
Lang
remove - 7688
palms
transplant 7689

Date: 11-16-2015

Please Clearly Print All Information unless indicated otherwise.

Tree Address 617 Ashe Street
Cross/Corner Street Southard Street
List Tree Name(s) and Quant (1) Lang Lang, (2) Christmas Palm & transplant (2) Alexander Palms
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 Remove Lang Lang tree & Christmas palms. They are in poor location
Reason for Request _____
Property Owner Name Don Desrosiers & Will Dewey
Property Owner eMail Address harbourhaven@cox.net
Property Owner Mailing Address 617 Ashe Street
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (401) 864 - 4484
Property Owner Signature _____

Representative Name Carl Gilley
Representative eMail Address thrinaxinc@gmail.com
Representative Mailing Address 1207 Grinnell Street
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 304 - 1032

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 ☐

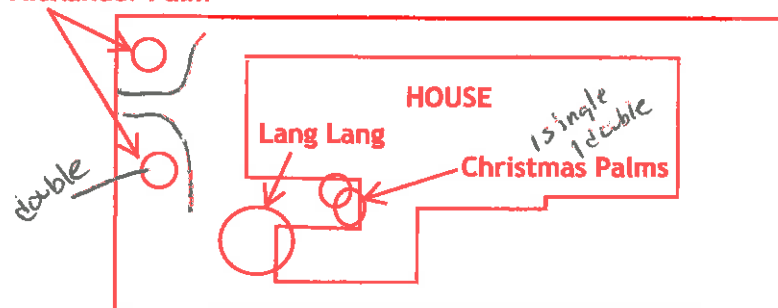
<<<<< Sketch location of tree in this area including cross/corner Street >>>>>

A
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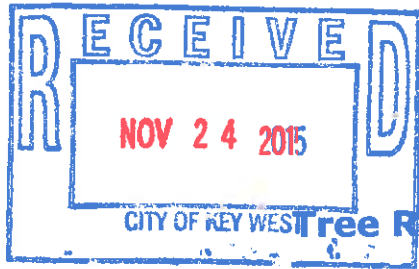
Alexander Palm

Please identify tree(s) with colored tape



3'1" rise
11.7 dbh

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:

11-16-2015

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	617 Ashe Street		
Property Owner Name	Will Dewey & Don Desrosiers		
Property Owner eMail Address	harbourhaven@cox.net		
Property Owner Mailing Address	617 Ashe Street		
Property Owner Mailing City	Key West	State	Florida
Property Owner Phone Number	401 864 4484		33040
Property Owner Signature			
Representative Name	Carl Gilley		
Representative eMail Address	thrinaxinc@gmail.com		
Representative Mailing Address	1207 Grinnell Street		
Representative Mailing City	Key West	State	Florida
Representative Phone Number	305 304 1032		33040

I Donald R. Desrosiers, 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

The forgoing instrument was acknowledged before me on this 20th day November.

By (Print name of Affiant) Donald R. Desrosiers who is personally known to me or has produced driver license as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Mackenzie Williams Notary Public - State of Florida

(seal) Print Name: Mackenzie Williams

My Commission Expires: April 7, 2019

