STAFF REPORT

DATE: January 26, 2016

RE: 1226 Von Phister Street (permit application # T16-7758)

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

An application was received requesting the removal of **(2) Bulnesia and (1) Frangipani tree**. A site inspection was done on January 21, 2016 and documented the following:

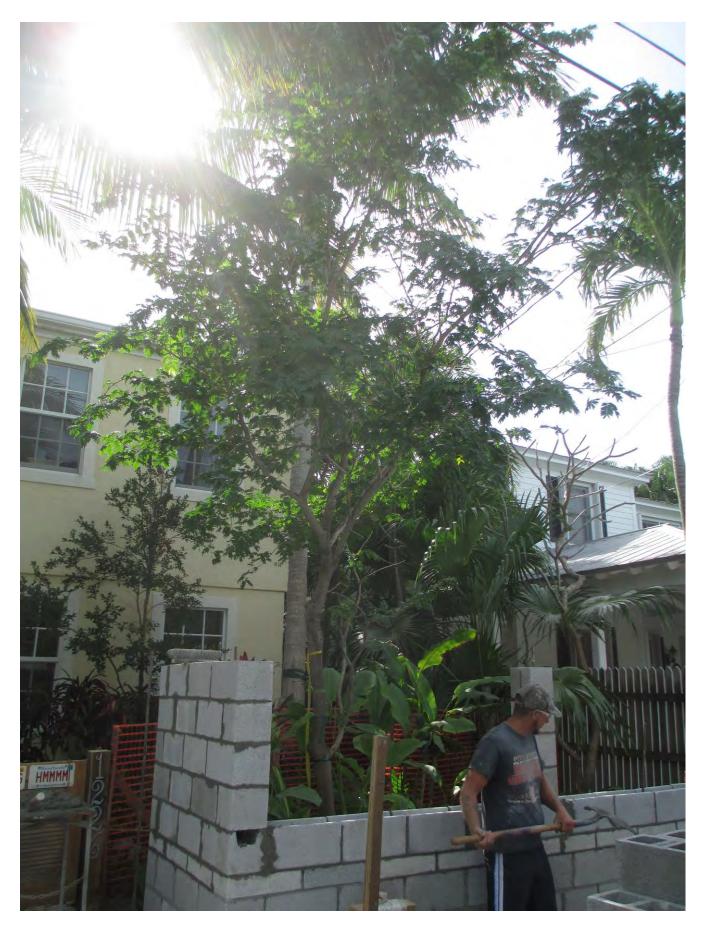


Bulnesia #2 F

Frangipani

Bulnesia #1

Tree Species: Bulnesia (Bulnesia arborea)





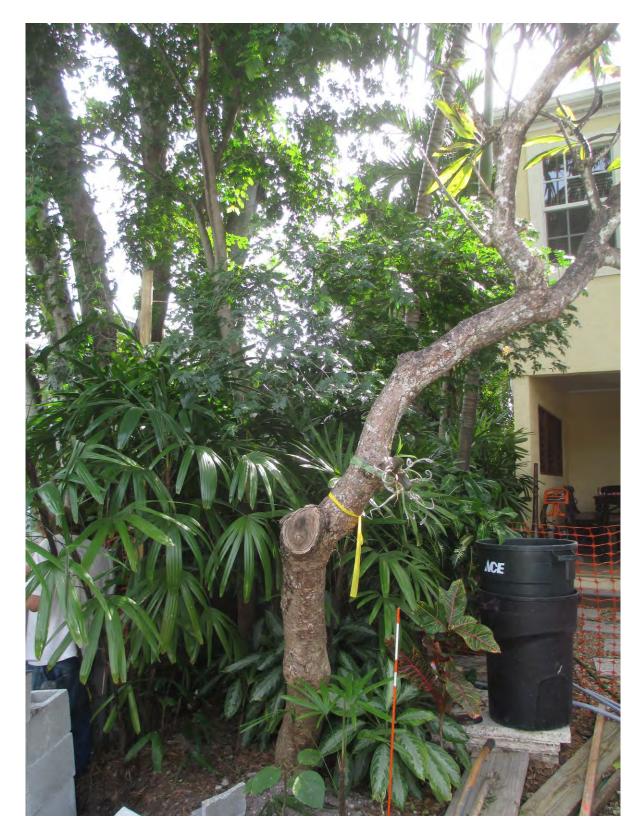
Tree #1 Diameter: 4.7" Location: 80% Species: 50% (not on protected or not protected tree list) Condition: 50% (fair to poor) Total Average Value = 60% Value x Diameter = 2.8 replacement caliper inches





Tree #2 Diameter: 5" Location: 80% Species: 50% (not on protected or not protected tree list) Condition: 50% (fair to poor) Total Average Value = 60% Value x Diameter = 3 replacement caliper inches Tree Species: Frangipani (Plumeria sp.)





Diameter: 5.7" Location: 80% Species: 50% (not on protected or not protected tree list) Condition: 40% (poor) Total Average Value = 56% Value x Diameter = 3.2 replacement caliper inches Recommendation: Recommend approval of the removal of two (2) Bulnesia tree and one (1) Frangipani tree at 1226 Von Phister Street to be replaced with a total of 9 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted onsite.

Application

7758



Tree Permit Application

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1An **Cross/Corner Street** List Tree Name(s) and Quantity (Inesia Arborea 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 Trees are in soor Condin Linn. and. Reason for Request RICHARD **× Property Owner Name A Property Owner eMail Address** べている × Property Owner Mailing Address 12 **X Property Owner Mailing City** State FL Zip 33040-4 Y Property Owner Phone Number (365 **× Property Owner Signature Representative Name Representative eMail Address Representative Mailing Address Representative Mailing City** State P/ Zip Representative Phone Number (305 / 304 -514 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 thee(s) with colored tape 4.7" Ubh Buhesir 1

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



Tree Representation Authorization

Date: 1/1ス

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 Mame Just Key Representative Mailing Address Representative Mailing City Representative Phone Number (305) 304

IKS R Zip 33040 K2 Y State ML

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✓ I KICHARD BERLIN, 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 13th day January 2016

By (Print name of Affiant) Richard BCAIL who is personally known to me or has produced Flands Drivers License as identification and who did take an oath.

NOTARY PUBLI Sign Name:	Wien	Phille
Print Name: <u>C</u>	-	

My Commission Expires: June 3,2019

A 2. 44	COLLEEN L. FULLER
	Notery Public, State of Florida
	Commission# FF 237248
AND THE REAL	My comm. expires June 3, 2019

Notary Public - State of Florida (seal)