

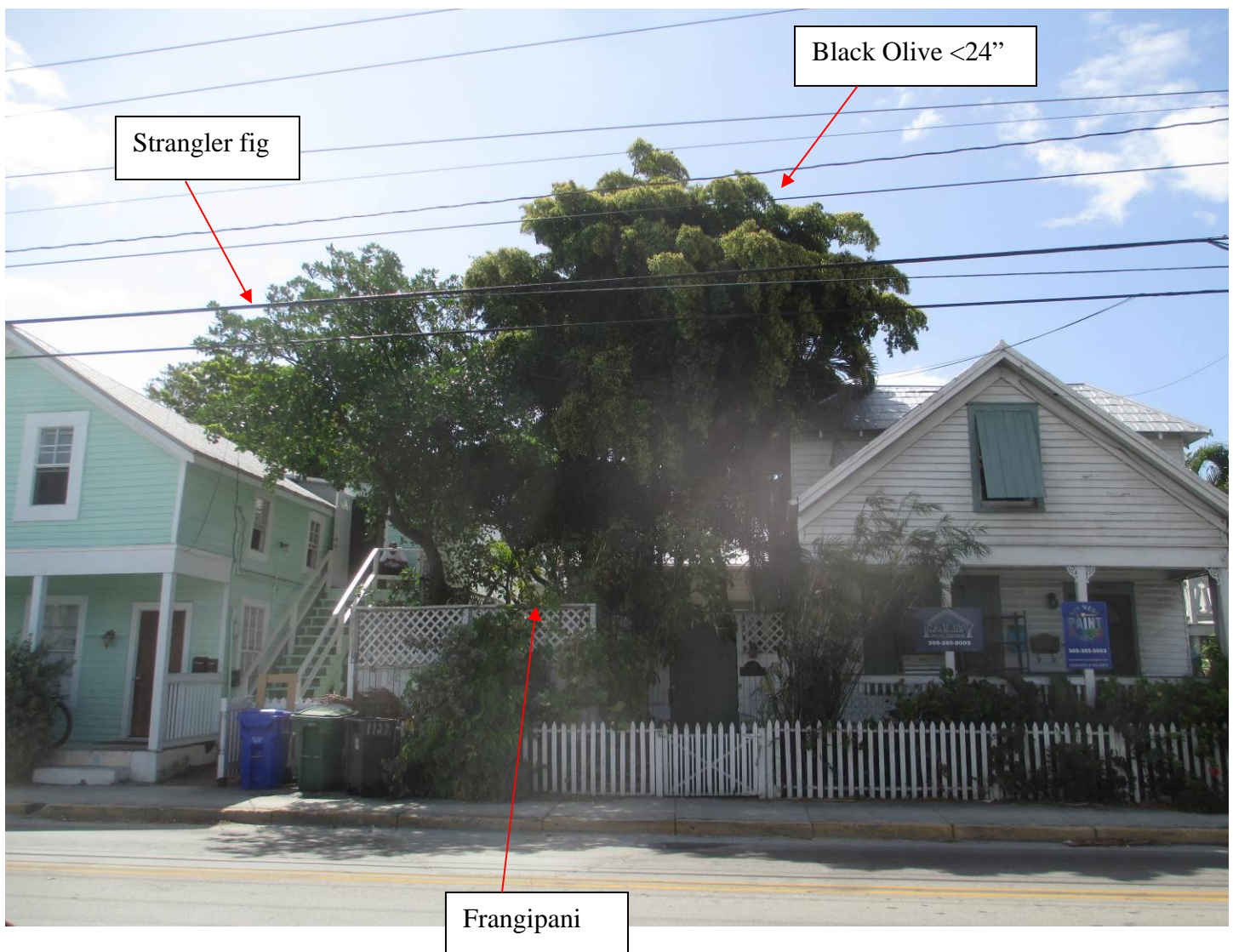
STAFF REPORT

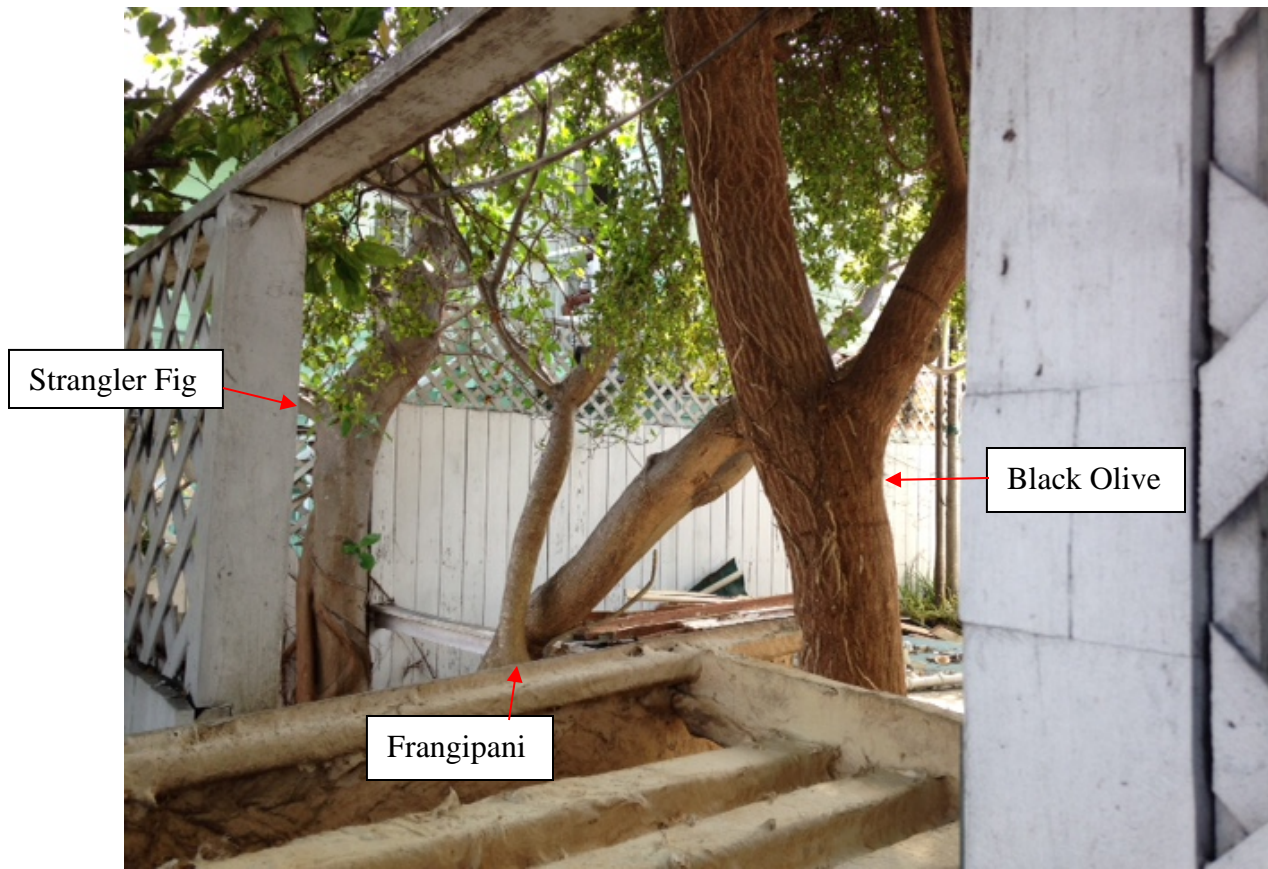
DATE: April 21, 2016

RE: **1118 Eaton Street (permit application # T16-7909)**

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

An application was received requesting the removal of **(1) Strangler Fig and (1) Frangipani tree**. A site inspection was done on January 6, 2016, March 30, 2016 and April 19, 2016 and documented the following:





Tree Species: Strangler Fig (*Ficus aurea*)











Diameter: 14.6"

Location: 40% (growing on fence)

Species: 100% (on protected tree list)

Condition: 50% (fair to poor)

Total Average Value = 63%

Value x Diameter = 9 replacement caliper inches

Tree Species: Frangipani (Plumeria sp.)







Diameter: 12.7"

Location: 70% (center of front yard at edge of deck)

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

Condition: 60% (fair, sprawling tree with significant lean)

Total Average Value = 60%

Value x Diameter = 7.6 replacement caliper inches

Recommend approval of the removal of one (1) Strangler Fig tree.

Strangler fig replacements = 9 caliper inches

Frangipani replacements = 7.6 caliper inches

Total = 16.6 caliper inches

Application

need files
measured



7909

1- Strangler Fig
1- Frangipani

Tree Permit Application

Date: 4/11/16

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1118 EATON ST. KEY WEST FL, 33040
Cross/Corner Street
List Tree Name(s) and Quantity BLACK OLIVE, ~~FRANGIPANI~~, STRANGLER FIG,
Species Type(s) check all that apply () Palm () Flowering () Fruit () Shade () Unsure
Reason(s) for Application:

() REMOVE () Tree Health () Safety (X) Other/Explain below
() TRANSPLANT () New Location () Same Property () Other/Explain below
() HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction
Additional Information and Explanation REMOVAL TO ALLOW FOR APPLIED CONSTRUCTION PERMITS.

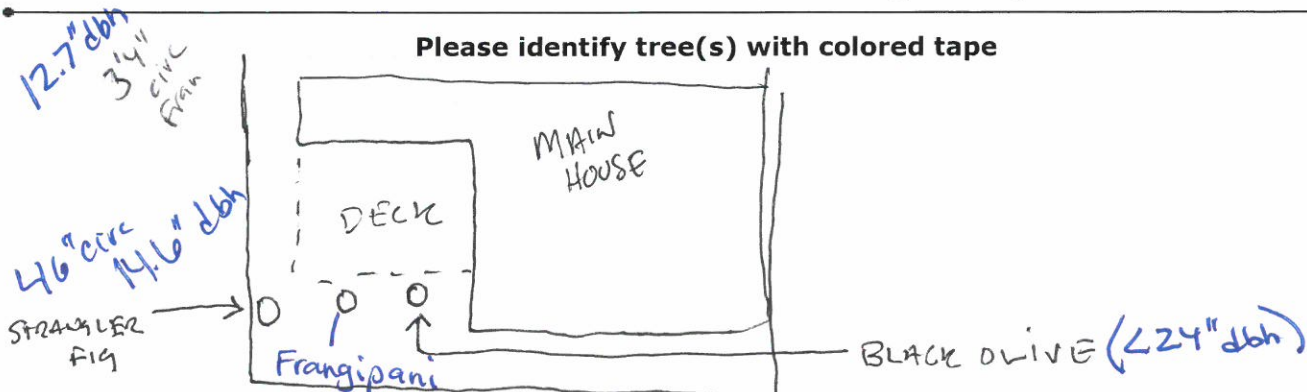
Property Owner Name NORA BARNES
Property Owner eMail Address NORA.BARNES@COX.NET
Property Owner Mailing Address 1401 WHITE ST. 1
Property Owner Mailing City KEY WEST **State** FL **Zip** 33040
Property Owner Phone Number (757) 287-1373
Property Owner Signature

Representative Name MATT FAUBY
Representative eMail Address FAUBYBUILDERS@GMAIL.COM
Representative Mailing Address 78 HILTON LANE RD
Representative Mailing City KEY WEST **State** FL **Zip** 33040
Representative Phone Number (305) 395-9003

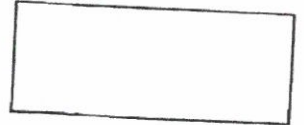
NOTE: A Tree Representation Authorization form must accompany this application if someone other than the owner will be representing the owner at a Tree Commission meeting or picking up an issued Tree Permit.

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.



Tree Representation Authorization

Date: 4/11/16

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 1118 EATON ST. KEY WEST FL 33040

Property Owner Name NORA BARNES
Property Owner eMail Address NORA.BARNES@COX.NET
Property Owner Mailing Address 1401 WHITE ST. KEY WEST, FL 33040
Property Owner Mailing City KEY WEST State FL Zip 33040
Property Owner Phone Number (757) 287-1373
Property Owner Signature SEE BELOW

Representative Name MATT FAUBY
Representative eMail Address FAUBYBUILDERS@GMAIL.COM
Representative Mailing Address 75 WILTON HAVEN RD
Representative Mailing City KEY WEST State FL Zip 33040
Representative Phone Number (305) 395-9003

I Nora A. Barnes, 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 is any questions or need access to my property.

Property Owner Signature [Signature]

The forgoing instrument was acknowledged before me on this 25th day March 2016.

By (Print name of Affiant) Nora A. Barnes who is personally known to me or has produced DLIC VA T62621884 as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: [Signature]

Print Name: Glenda D Swenson

My Commission Expires: 03/31/2020

Notary Public - State of Virginia Florida (seal)

GLENDIA DIANNE SWENSON
NOTARY PUBLIC
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES MAR. 31, 2020
COMMISSION # 7230810