STAFF REPORT

DATE: April 22, 2016

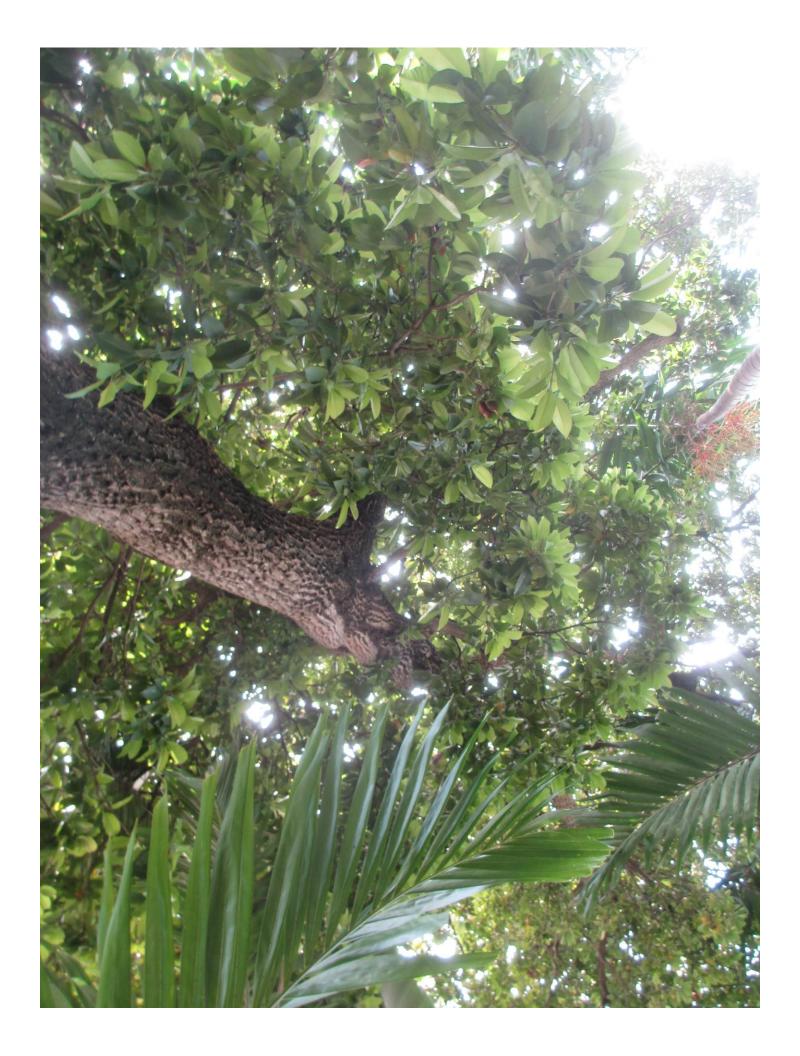
RE: 615 Elizabeth Street (permit application # T16-7937)

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

An application was received requesting the removal of **(1) Sapodilla tree**. A site inspection was done on April 22, 2016 and documented the following:

Tree Species: Sapodilla (Manilkara zapote)











NOTE: pool installed prior to tree being planted. Pool built in 1936

Diameter: 24.5"

Location: 60% (close to property line and pool house. Impacting pool deck

tiles)

Species: 100% (on protected tree list)

Condition: 50% (fair)

Total Average Value = 70%

Value x Diameter = 17 replacement caliper inches

Application





1937

Tree Permit Application

	Date: 4-20-2016
Please Clearly Print	All Information unless indicated otherwise.
Tree Address	615 Ellzabeth St.
Cross/Corner Street	Bakers Lane
List Tree Name(s) and Quantity	1 Sappodilla
Species Type(s) check all that apply	() Palm () Flowering 💫 Fruit 🎘 Shade () Unsure
Reason(s) for Application:	Ith () Cafaty (M Othor/Typlain balayy
	Ith () Safety (X) Other/Explain below
	ation () Same Property () Other/Explain below
	emoval () Crown Cleaning/Thinning () Crown Reduction
The state of the s	was are do ma damage, the canopy makes
and Franksantian C	is and the owners have wanted this tree out
and Explanation	any years
Property Owner Name	Robert and Time Newman
Property Owner eMail Address	vinkenwest of aclocan
Property Owner Mailing Address	615 Ellander St.
Property Owner Mailing City	Keywat State / Zip 33040
Property Owner Phone Number	(305) 294 - 0240
Property Owner Signature	
	10 10
Representative Name	Lameth Cha
Representative eMail Address	1602 Laird St.
Representative Mailing Address Representative Mailing City	Keywest State PC Zip 33040
Representative Phone Number	(308) 296 - 810
	form must accompany this application if someone other than the
	ee Commission meeting or picking up an issued Tree Permit.
d d d d Cleatab la antique of two	Tree Representation Authorization form attached ()
<<<< Sketch location of tree	in this area including cross/corner Street >>>>
Please ide	entify tree(s) with colored tape
	[pool] & 1 AS
	615 July 14.5"
	1 5
Aula	615
Sappodilia	ELECT IN IN
V 1	DI 20050T
F	

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

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Tree Representation Authorization

Date: 4-18-2016

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 A	II Information unless indicated otherwise.	
	615 Glizabeth Street	
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	Kenneth Khy 1602 Laird St. Ken Wost State FZ Zip 33040 (308) 296-8101	
I Rosert J. Nouman JC , 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 acknowl	edged before me on this 18 day April 16.	
By (Print name of Affiant) ROBERT produced R DL	Newman Je _ who is personally known to me or has _ as identification and who did take an oath.	
NOTARY PUBLIC Sign Name:	Notary Public - State of Florida (seal)	
Print Name: NUMBER DISSUM My Commission Expires: DEC 14.2	NANEA DISSON MY COMMISSION # FF944552 EXPIRES: December 16 2010	

Updated: 02/22/2014