

STAFF REPORT

DATE: April 22, 2016

RE: **514 Margaret Street (permit application # T16-7932)**

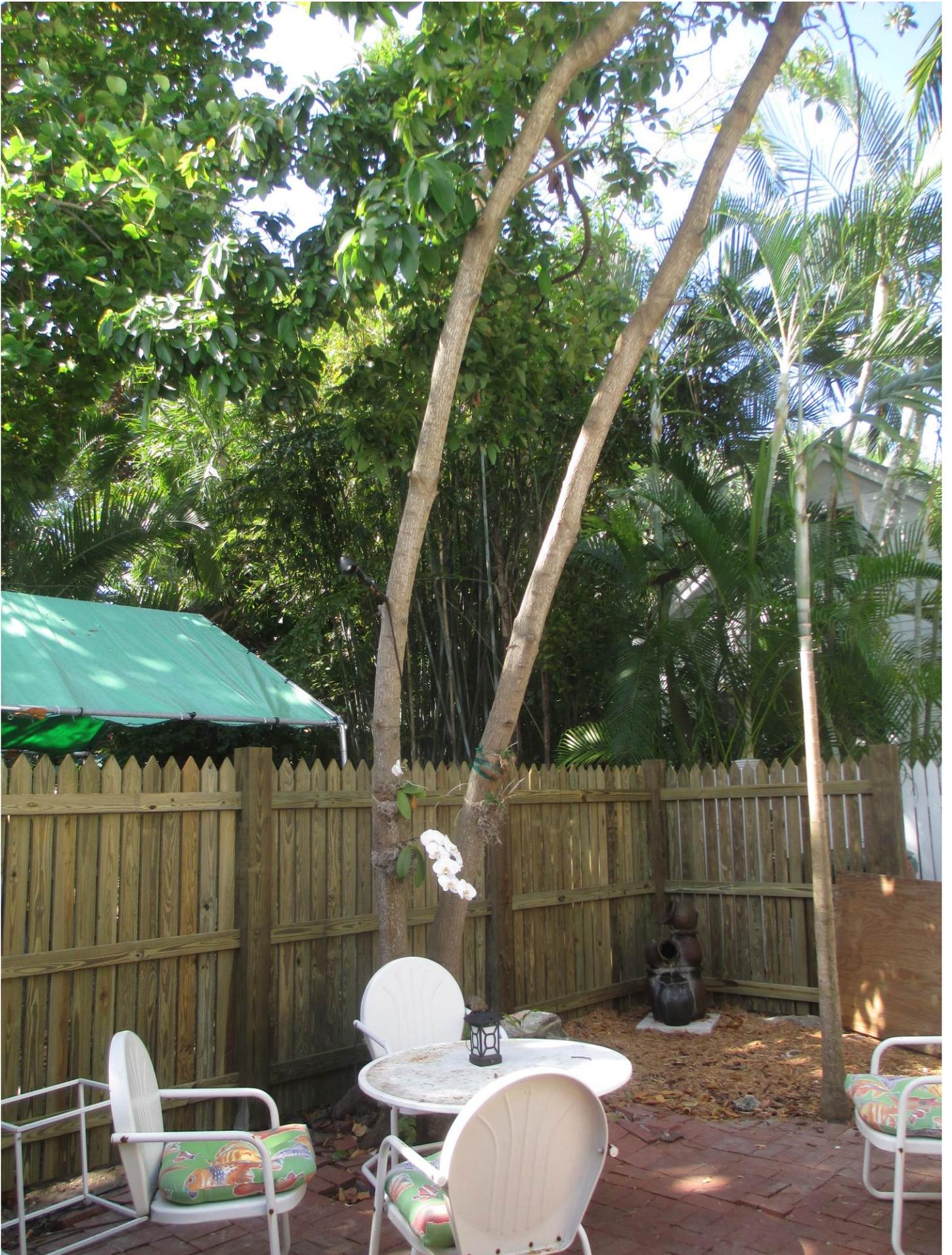
FROM: Karen DeMaria, City of Key West Urban Forestry Manager

An application was received requesting the removal of **(1) Avocado tree**. A site inspection was done on April 19, 2016 and documented the following:

Tree Species: Avocado (*Persea americana*)











Diameter: 11.1"

Location: 80%

Species: 100% (on protected tree list)

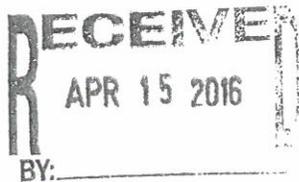
Condition: 30% (very poor, root structure and base of tree exposed, elongated trunks, poor structure)

Total Average Value = 70%

Value x Diameter = 7.7 replacement caliper inches

Recommendation: Recommend approval of the removal of one (1) Avocado tree at 514 Margaret Street to be replaced with 7.7 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted on site.

Application



7924

avocado 7932

Tree Permit Application

Date: 4-15-2016

Please Clearly Print All Information unless indicated otherwise.

Tree Address 514 Margaret St.
Cross/Corner Street Fleming St.
List Tree Name(s) and Quantity 1 Sea Grape 1 Avocado → 514
Species Type(s) check all that apply () Palm () Flowering (X) Fruit (X) 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 The Sea Grape has considerable decay and presents a hazard. The avocado has a tumble shape, was uprooted in the past and kept growing.

Reason for Request

Property Owner Name Robert Manley 514 Margaret LLC
Property Owner eMail Address robertwmanley@gmail.com
Property Owner Mailing Address 514 Margaret St.
Property Owner Mailing City Key West **State** FL **Zip** 33040
Property Owner Phone Number (757) 846-7077
Property Owner Signature

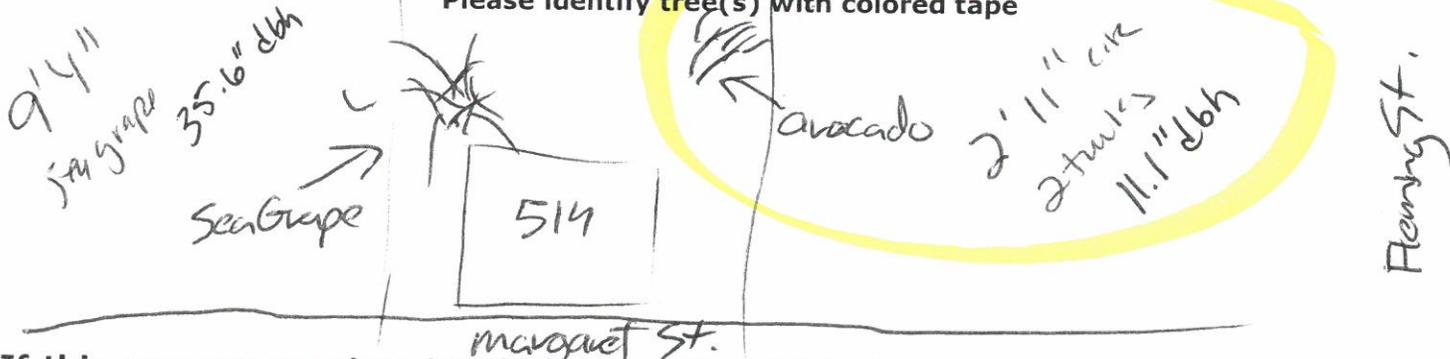
Representative Name Kenneth King
Representative eMail Address
Representative Mailing Address 1602 Laurel St.
Representative Mailing City Key West **State** FL **Zip** 33040
Representative Phone Number (305) 296-8101

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 tree(s) with colored tape



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: APRIL 04, 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 All Information unless indicated otherwise.

Tree Address 514 Margaret St.

Property Owner Name 514 Margaret, LLC (Robert Manly, Owner)

Property Owner eMail Address robertwmanly@gmail.com

Property Owner Mailing Address Robert Manly PO Box 785

Property Owner Mailing City Key West State FL Zip 33040

Property Owner Phone Number (757) 846-7077

Property Owner Signature Robert Manly

Representative Name Kenneth King

Representative eMail Address _____

Representative Mailing Address 1602 Laid St.

Representative Mailing City Key West State FL Zip 33040

Representative Phone Number (305) 296-8101

I _____, 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 Robert Manly

The forgoing instrument was acknowledged before me on this 4th day April, 2016.

By (Print name of Affiant) ROBERT MANLY who is personally known to me or has produced N/A as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Nicole Twyman

Print Name: NICOLE TWYMAN

My Commission Expires: APRIL 08, 2019

Notary Public - State of Florida (seal)

