

8287

Tree Permit Application

Date: 1-17-17

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1103/1105 Simonton St ROW
Cross/Corner Street _____
List Tree Name(s) and Quantity 1-mahogany
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 _____

Reason for Request _____

Property Owner Name City of Key West
Property Owner eMail Address _____
Property Owner Mailing Address _____
Property Owner Mailing City PO Box 1409 State FL Zip 33041
Property Owner Phone Number () - _____
Property Owner Signature [Signature]

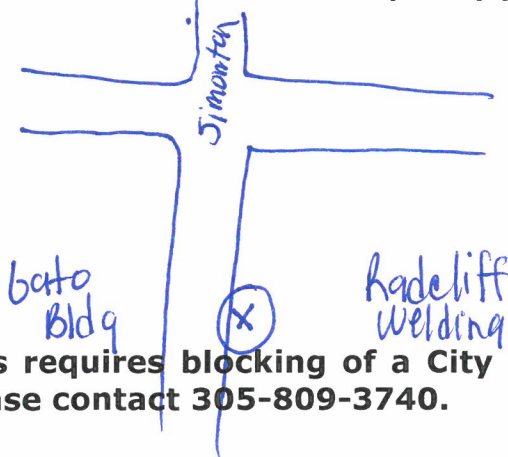
Representative Name Karen Bellaria
Representative eMail Address _____
Representative Mailing Address _____
Representative Mailing City _____ State _____ Zip _____
Representative Phone Number () - 3768

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



11' circ
42.0" dbh

If this process requires blocking of a City right-of-way, a separate ROW Permit is required. Please contact 305-809-3740.

Karen DeMaria

From: Kkdemaria@aol.com
Sent: Thursday, October 27, 2016 1:04 PM
To: Karen DeMaria
Subject: Simonton street tree



219

semi hit tree trunk

\$ 9,950 plus tree
claim

Sec. 110-259. Duty of private property owner.

- (a) It shall be the duty of any person or entity owning or occupying private real property bordering on any street, upon which private property there is a tree or trees, to maintain such trees in a manner that such trees will not obstruct the street lights, obstruct the passage of pedestrians on sidewalks, rights-of-way, roadways, obstruct vision of traffic signs or traffic lights, obstruct views of any street or alley intersection or grow into utility wires. All landscaping shall be trimmed at least 80 inches above a walking surface and a minimum width of 36 inches for clear passage, or the width of the sidewalk.

Sec. 108-453. – Required clearance over roadways and fire lanes.

Every tree, whether new or existing, shall have a minimum of 14 feet of clearance over any roadway or fire lane, whether public or private, to allow for the unobstructed passage of emergency apparatus to safely travel under.

From US Dept Transportation Federal Highway Administration:

4.3.5 Vertical Clearance

Vertical clearance is defined as the minimum unobstructed vertical passage space required along a sidewalk. Vertical clearance is often limited by obstacles such as building overhangs, tree branches, signs, and awnings.

The guidelines and recommendations that were reviewed for minimum allowable vertical clearance are included in Tables 4-2.1 through 4-2.4 at the end of this chapter. The majority of guidelines require a minimum of 2.030 m (80 in) of unobstructed vertical passage space. However, Oregon and Pennsylvania require 2.1 and 2.4 m (83 and 94 in) of vertical passage space, respectively (OR DOT, 1995; PA DOT, 1996). ADAAG states that circulation spaces, such as corridors, should have at least 2.030 m (80 in) of head room. ADAAG further specifies that if the vertical clearance of an area next to a circulation route is less than 2.030 m (80 in), elements that project into the circulation space must be protected by a barrier to warn people who are visually disabled or blind (ADAAG, U.S. Access Board, 1991).

4.3.8 Obstacles and Protruding Objects

Obstacles in the pedestrian environment are defined as objects that limit the vertical passage space, protrude into the circulation route, or reduce the clearance width of the sidewalk. Obstacles with large overhangs that protrude into the path of travel can be hazardous for people with visual impairments if they are difficult to detect. The full width of the circulation path should be free of protruding objects. Obstacles that reduce the minimum clearance width, such as decorative planters on a narrow sidewalk, can create significant barriers for wheelchair or walker users.

Most guidelines for accessibility concur with the ADAAG specifications for protruding objects. ADAAG states that objects projecting from walls that have leading edges between 0.685 m and 2.030 m (27 in and 80 in) should not protrude more than 100 mm (4 in) into walks and passageways. Freestanding objects mounted on posts or pylons may overhang a maximum of 0.305 m (12 in) from 0.685 m to 2.030 m (27 in to 80 in) above the ground (ADAAG, U.S. Access Board, 1991), as shown in Figure 4-13.

During the sidewalk assessments, potential obstacles and protruding objects were measured as they occurred along the sidewalk. Characteristics of obstacles measured in the sidewalk assessment include height, amount of overhang over the supporting structure (if any), and minimum clearance width around the obstacle.

The following objects can make a sidewalk difficult for some users to traverse if they protrude into the pathway or reduce the vertical or horizontal clear space:

- Awnings
- Benches
- Bike racks
- Bollards
- Cafe tables and chairs
- Drinking fountains
- Fire hydrants
- Folding business signs
- Grates
- Guy wires
- Landscaping
- Mailboxes (public and private)
- Newspaper vending machines
- Parking meters
- Planters
- Public telephones (mounted)
- Puddles
- Signal control boxes
- Sign poles
- Snow
- Street vendors' carts
- Street light poles
- Street sculptures
- Telephone booths
- Telephone/utility poles and their stabilizing wires
- Traffic sign poles
- Transit shelters
- Trash bags and cans
- Tree, bush, and shrub branches
- Utility boxes

Vertical Clearance

The adopted criteria provide vertical clearance values for the various highway functional classifications (Table 19). These criteria are set to provide at least a 1-foot differential between the maximum legal vehicle height and the roadway, with additional allowances for future resurfacing. These clearances apply to the entire roadway width (traveled way and shoulders). A formal design exception is required whenever these criteria are not met for the applicable functional classification.

Clarifications

The specific standards for vertical clearance adopted for the Interstate System maintain its integrity for national defense purposes. On Interstates, the clear height of structures shall not be less than 16 feet (4.9 meters) over the entire roadway width, including the useable width of shoulder. In urban areas, the 16-foot (4.9-meter) clearance shall apply to at least a single routing. On other urban Interstate routes, the clear height shall not be less than 14 feet (4.3 meters). A design exception is required if this standard is not met. Exceptions on the Interstate must also be coordinated with the Military Surface Deployment and Distribution Command Transportation Engineering Agency of the Department of Defense.

TABLE 19

Ranges for Minimum Vertical Clearance

Type of Roadway	Rural		Urban	
	US (feet)	Metric (meters)	US (feet)	Metric (meters)
Freeway	14–16*	4.3–4.9*	14–16*	4.3–4.9*
Arterial	14–16	4.3–4.9	14–16	4.3–4.9
Collector	14	4.3	14	4.3
Local	14	4.3	14	4.3

*17 feet (5.1 meters) for sign trusses and pedestrian overpasses.

Source: A Policy on Geometric Design of Highways and Streets, AASHTO

Karen DeMaria

From: Todd C. Stoughton
Sent: Wednesday, January 11, 2017 10:50 AM
To: Karen DeMaria
Cc: Mark Finigan; Laura Estevez
Subject: Safety/Liability Concerns
Attachments: PGT Transportation.pdf; PGT Transportation.pdf

Karen,

As per your direction, attached are the copies of the reports taken and given after the accident due to low hanging limbs on Simonton Street. The City of Key West paid \$9331.39 for this claim. If you need anything else from Safety/Risk just let me or Laura know. Thanks.

Regards,

Todd



CITY OF KEY WEST

Please be advised, you cannot save information; type and print only...

Print Form

Police Report File Number

Claimant Incident/Accident Report

16-14-401823

Print Name P.G.T. Transport, Inc. Home (305) 885551 Cell (305) 528-7307
Address 10302 New South River Drive Bay 24 City Medley State FL Zip Code 33178
Email: Tgomeztr@aol.com Date of Birth 11/12/64
Occupation: owner / President (Teresita Gomez)
Date of Accident 10/27/16 Time of Accident 11:40AM ☒ AM or PM Am

Exact Location of incident/Accident (street and/or address if known)

Simonton Street & Amelia Street

Describe in your own words the Incident/Accident with emphasis on relevant details:

Heading north on Simonton, to make a delivery at Reteliff Welding - 1105 Simonton Street just driving slow, because I was getting near the delivery, when The Truck just stop.

If reporting injury describe in detail extent of injury and whether medical attention was sought. Attach receipts for services or treatment. Include contact information for treating physician and/or service providers

N/A

Is there property damage? Describe extent of damage and specific loss: Provide receipts relevant to loss.

The whole roof on the trailer, got peeled off, from front to back. The railing on side got completely damaged, along with the rear post & tracks, that hold the door.

(Continue on back)

there was also, a higher ranking officer that came by and was saying the same thing. The Customer I was delivering to also said, he has wanted to put a camera there, due to all the people that hit the tree. Also it's not just that the tree is low, but the street is also raised due to the tree's roots.



THE CITY OF KEY WEST

Claimant Incident/Accident Report (. . .continued)

Print
NameTeresita GomezIf weather was a contributing
factor describe conditions?Perfect weatherHad you consumed any alcoholic
beverages prior to incident/
accident? If so how much?NoWas a police report filed with KWPD? If so,
attach a copy of the report and provide
report number and name of officer(s) who
responded to the accident (if available)Yes, Report # 86534838Officer A. Gauillet Badge #3600

Please include any photos and/or any documentation you have that may be relevant to this accident/incident

Is the area where incident
occurred familiar to you, Explain:Not that much.How often do you pass by this
area: Explain:Have driven by this area once
before.Were you aware of the
condition that may have
contributed to this accident/
incident? If yes, explain:NoIf there were witnesses
provide name and contact
information. Use rear of
this form if necessaryNo

Additional Remarks:

Continue on back if form
if necessary indicating
that additional info has
been recorded there.City Commissioner drove by and commented
that the tree hangs below the height
limit and has requested the tree be cut
down

Claimant's signature

TERESITA Gomez

Date

11/25/16Photos/Receipts Attached? Yes X No Is there additional info on back of form? Yes X No

Forward completed form to: Lisa Takach-Borzy
Risk Manager/Safety Officer
The City Of Key West
P.O. Box 1409
Key West, FL 33041-1409

Phone: (305) 809-3811
Fax: (305) 294-8879
Email: ltakachborzy@cityofkeywest-fl.gov

FLORIDA TRAFFIC CRASH REPORT

LONG FORM ☒ SHORT FORM ☐ UPDATE ☐

(Electronic Version)

HIGHWAY SAFETY & MOTOR VEHICLES,
TRAFFIC CRASH RECORDS
NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

Date of Crash 27/Oct/2016 11:40 AM	Time of Crash 27/Oct/2016 11:40 AM	Date of Report 27/Oct/2016 12:00 AM	Invest. Agency Report Number 16-401823	HSMV Crash Report Number 86534838
---------------------------------------	---------------------------------------	--	---	--------------------------------------

CRASH IDENTIFIERS

County Code 38	City Code 42	County of Crash MONROE	Place or City of Crash KEY WEST	Within City Limits Yes	Time Reported 27/Oct/2016 11:40 AM	Time Dispatched 27/Oct/2016 11:48 AM
Time on Scene 27/Oct/2016 12:00 PM	Time Cleared Scene 27/Oct/2016 01:00 PM	Completed Yes	Reason (if Investigation NOT Completed)			Notified By Law Enforcement

ROADWAY INFORMATION

Crash Occured On Street, Road, Highway SIMONTON ST			At Street Address#	At Latitude and Longitude
At Feet 120	Or Miles	Direction North	From Intersection With Street, Road, Highway AMELIA ST	Or From Milepost #
Road System Identifier 5 Local		Type Of Shoulder 3 Curb	Type Of Intersection 1 Not at Intersection	

CRASH INFORMATION (Check if Pictures Taken) ☐

Light Condition 1 Daylight	Weather Condition 1 Clear	Roadway Surface Condition 1 Dry	School Bus Related 1 No	Manner Of Collision
First Harmful Event Type	First Harmful Event 32	First Harmful Event Location 1 On Roadway	Within Interchange No	First Harmful Event Relation to Junction 1 Non-Junction
Contributing Circumstances: Road 1 None		Contributing Circumstances: Road		Contributing Circumstances: Road
Contributing Circumstances: Environment 1 None		Contributing Circumstances: Environment		Contributing Circumstances: Environment
Work Zone Related 1 No	Crash In Work Zone	Type Of Work Zone	Workers In Work Zone	Law Enforcement In Work Zone

VEHICLE (Check if Commercial) ☒

Vehicle 1	Motor Vehicle Type 1 Vehicle in Transport	Hit and Run 1 No	Veh License Number BTJA17	State FL	Reg. Expires 31/Dec/2016	Permanent Reg.	VIN 4VA7BAPF3WN755973			
Year 1998	Make VOLV	Model	Style TR	Color RED	Extent of Damage Minor	Est. Damage 6000	Towed Due To Damage No	Vehicle Removed By DRIVER	Rotation Driver	
Insurance Company SPARTA INSURANCE COMPAN				Insurance Policy Number 058CP00134						
Name of Vehicle Owner (Check Box if Business) <input checked="" type="checkbox"/>			Current Address (Number and Street) PGT TRANSPORT INC 10302 NW S RIVER DR BAY 24			City and State MEDLEY FL		Zip Code 33178		
Trailer One:	License Number 5285CF	State FL	Reg. Expires	Permanent Reg. Yes	VIN 1GRAA902XPB113501	Year 1993	Make GDAN	Length 48	Axles 2	
Trailer Two:	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles	
Vehicle Traveling:	Direction North	On Street, Road, Highway SIMONTON ST				At Est. Speed 10	Posted Speed 30	Total Lanes 2		
CMV Configuration 6		Cargo Body Type 3		Area of Initial Impact			Most Damaged Area			
Comm GVWR/GCWR 3 More than 26,000 lbs (11,793 kg)		Trailer Type (trailer one) Single Semi Trailer		Trailer Type (trailer two)		18. Undercarriage 19. Overturn 20. Windshield 21. Trailer			18. Undercarriage 19. Overturn 20. Windshield 21. Trailer	
Haz. Mat. Release 1	Haz Mat. Placard 1	Number		Class						
Motor Carrier Name PGT TRANSPORT INC				US DOT Number 1904890						
Motor Carrier Address 10302 NW S RIVER DR BAY 24				City and State MEDLEY FL		Zip Code 33178		Phone Number		
Comm/Non-Commercial 1	Vehicle Body Type 20 Medium/Heavy Trucks (more than 10,000 lbs (4,536 kg))	Vehicle Defects (one) 1 None		Vehicle Defects (two)		Emergency Vehicle Use 1 No		Special Function of MV 1 No Special Function		
Vehicle Maneuver Action 1 Straight Ahead	Trafficway 1 Two-Way, Not Divided	Roadway Grade 1 Level		Roadway Alignment 1 Straight		Most Harmful Event 3 Collision with Fixed Object		Most Harmful Event Detail 32 Tree (standing)		
Traffic Control Device For This Vehicle 1 No Controls		First (1) Sequence of Events 3 Collision with Fixed Object 32 Tree (standing)		Second (2) Sequence of Events		Third (3) Sequence of Events		Fourth (4) Sequence of Events		

PERSON RECORD

Person# 1	Description 1 Driver	Vehicle # 1	Name DWAYNE ANTHONY LATTERY	Date of Birth 10/Jul/1971	Sex 1 Male	Phone Number 3054945438	Re-Exam No
Address 14404 NW 15TH DR		City MIAMI	State FL	Zip Code 33167			
Driver License Number L-360-161-71-250-0	State FL	Expires 10/Jul/2022	DL Type 1 A	Req. End. 1 Yes	Injury Severity 1 None	Ejection 1 Not Ejected	

Date of Crash 27/Oct/2016 11:40 AM		Date of Report 27/Oct/2016 11:40 AM		Invest. Agency Report Number 16-401823		HSMV Crash Report Number 86534838	
Restraint System 3 Shoulder and Lap Belt Used	Air Bag Deployed 2 Not Deployed	Helmet Use 3 No Helmet	Eye Protection 3 Not Applicable	Seating Location Seat 1 Left	Seating Location Row 1 Front	Seating Location Other 1 Not Applicable	
Drivers Actions at Time of Crash (first) 77 Other Contributing Action		Drivers Actions at Time of Crash (second)			Driver Distracted By 1 Not Distracted	Vision Obstruction 1 Vision Not Obscured	
Drivers Actions at Time of Crash (third)		Drivers Actions at Time of Crash (fourth)			Drivers Condition at Time of Crash 1 Apparently Normal		
Suspected Alcohol Use 1 No	Alcohol Tested	Alcohol Test Type	Alcohol Test Result	BAC	Suspected Drug Use 1 No	Drug Tested	Drug Test Type Drug Test Result
Source of Transport to Medical Facility 1 Not Transported		EMS Agency Name or ID		EMS Run Number		Medical Facility Transported To	

NON VEHICLE PROPERTY DAMAGE

Vehicle# 1	Person#	Property Damage - Other Than Vehicle TREE OR SHRUB	Est. Amount 6500	Business Yes	Owner's Name CITY OF KEY WEST	Address PO BOX 1409	City & State KEY WEST FL	Zip Code 33040
---------------	---------	---	---------------------	-----------------	----------------------------------	------------------------	-----------------------------	-------------------

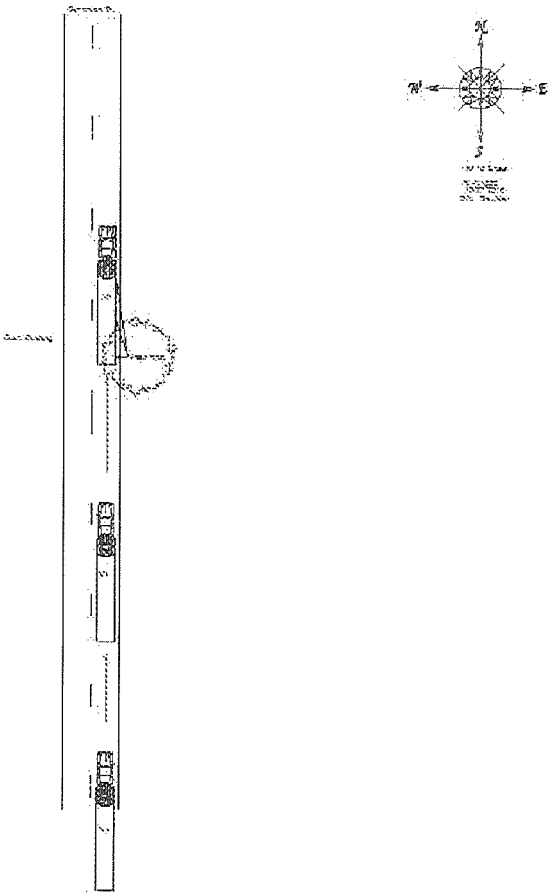
NARRATIVE

When I arrived on scene I spoke to the driver of V1. V1 was traveling north bound on Simonton St. passing in front of the Gato Building. As V1 was traveling past the Gato building the right side of the semi trailer got wedged under a branch from a tree. The branch dragged along the entire right side of the trailer until it came to a stop at the rear right corner of the trailer. There were no injuries reported and the semi-trailer was removed from under the tree limb by Arnolds Towing. No further information at this time.

REPORTING OFFICER

ID/Badge # 3600	Rank and Name OFC. A. GAUFILLET	Department KEY WEST POLICE DEPARTMENT	Type of Department PD
--------------------	------------------------------------	--	--------------------------

Date of Crash 27/Oct/2016 11:40 AM	Date of Report 27/Oct/2016 11:40 AM	Invest. Agency Report Number 16-401823	HSMV Crash Report Number 86534838
---------------------------------------	--	---	--------------------------------------





Crash

[\(/en\)](#)



www.BuyCrash.com

Thank you for your order!

[Find More Reports \(/en\)](#)

- Order successfully placed on 11/14/2016 3:37:40 PM (EST).
Confirmation number **#7105342**.
- Report downloads and this confirmation sent to **tgomeztr@aol.com**.
- You can also download reports from Order Summary below.

Order Summary

Date	October 27, 2016
Parties	D LATTERY, PGT TRANSPORT INC, CITY OF KEY WEST
Street Name	SIMONTON ST
Agency	KEY WEST PD
County	Monroe
Price	\$16.00

Invoice

ARNOLD'S AUTO & MARINE, INC.
5540 3rd Avenue
Key West, Florida 33040
(305) 296-3832

Invoice #: 160507
Invoice Date: 10/27/16
P.O. #:

Bill To:

OWNER REQUEST

Owner Information:

P.G.T. TRANSPORT INC.
10302 NW S RIVER DR BAY 24
MEDLEY FL 33178

Description	
Vehicle: 1998 Volvo VNM WHITE	
Location: AMELIA AND SIMONTON ST	
Reason: RECOVERY	
License: BTJA17 FL	
Destination: RECOVERY ON SITE	
VIN: 4VA7BAPF3WN755973	
Charge Details	Amount
Towing	\$800.00
Total	\$800.00
Discount	\$0.00
Amount Paid	-\$800.00
Balance Due	\$0.00

Signature: _____

Rental Agreement Cover Sheet

24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:57388330

Created by: M.MALTERER
Completed by: M.MALTERER
Entered At: 0726-10
Status: REWRITTEN

COMMERCIAL LOCAL

Pick Up Date: 10/27/16 02:48 PM
Expected Drop-Off: 11/03/16 02:48 PM
Actual Drop-Off: 11/03/16 02:48 PM
End Bill Date: 11/03/16 02:48 PM
Batch: 5021 on 11/15/16

CUSTOMER INFORMATION

Acct: 30P89L00 - 0726
PGT TRANSPORT
Attn: TERESITA
10302 NW SOUTH RIVER DR
MEDLEY, FL 33178-1310 USA
Store/Location # PGT TRANSPORT
Day (305) 885-5151

PICK UP/DROP OFF LOCATION

PENSKE MIAMI WEST (0726-10)
13000 NW SOUTH RIVER DR
MEDLEY, FL 33178 USA
Voice (305) 463-6006
Fax (305) 884-8265

DRIVER NAME(S): JOSE GOMEZ

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

TRAVEL SCOPE: Intrastate**UNIT INFORMATION**

Unit #:622831
7048 - 53FT T/A VAN TRAILER
License #: 5008CI
License State: FL
License Exp:
Owning Location: 0726-10

Max. Payload: 67,000 lbs.
Height: 13 ft.6 in.

Rented With Damage: NO
Returned With Damage: NO
Mileage Out: 167,408
Mileage In: 167,758
Fuel Out: EMPTY
Fuel In: EMPTY

NO HAZARDOUS MATERIAL BEING TRANSPORTED

OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility *DECLINED*

Limited Damage Waiver/LDW \$5000 Responsibility *DECLINED*

Liability Coverage/LIABILITY ACCIDENT INSURANCE *CUSTOMER PROVIDES*
Policy # 16942 Expires 12/01/16

Failure to return the property or equipment upon expiration of the rental period and failure to pay all amounts due (including costs for damage to the property or equipment) are prima facie evidence of the intent to defraud, punishable in accordance with Section 812.155, Florida Statutes.

X _____ Initials

THIS CONTRACT OFFERS, FOR ADDITIONAL CHARGE OPTIONAL VEHICLE PROTECTION TO COVER YOUR FINANCIAL RESPONSIBILITY FOR DAMAGE OR LOSS TO THE RENTAL VEHICLE. THE PURCHASE OF OPTIONAL VEHICLE PROTECTION IS OPTIONAL AND MAY BE DECLINED. YOU ARE ADVISED TO CAREFULLY CONSIDER WHETHER TO PURCHASE THIS PROTECTION IF YOU HAVE A RENTAL VEHICLE COLLISION COVERAGE PROVIDED BY YOUR CREDIT CARD OR AUTOMOBILE INSURANCE POLICY. BEFORE DECIDING WHETHER TO PURCHASE OPTIONAL VEHICLE PROTECTION, YOU MAY WISH TO DETERMINE WHETHER YOUR CREDIT CARD OR VEHICLE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF DEDUCTIBLE UNDER SUCH COVERAGE.

Rental Agreement Cover Sheet

24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:57388330

Created by: M.MALTERER
Completed by: M.MALTERER
Entered At: 0726-10
Status: REWRITTEN
Customer Name: PGT TRANSPORT
Created On: 10/27/16 08:49 PM

COMMERCIAL LOCAL

Pick Up Date: 10/27/16 02:48 PM
Expected Drop-Off: 11/03/16 02:48 PM
Actual Drop-Off: 11/03/16 02:48 PM
End Bill Date: 11/03/16 02:48 PM
Batch: 5021 on 11/15/16
Changed On: 11/15/16 09:18 PM

BILLING INFORMATION

Invoice #: PO #: Billing Cycle: Weekly

Bill Start Date: 10/27/16 02:48 PM Next Billing: 11/03/16

Remit To: PENSKE TRUCK LEASING CO.,L.P. - P.O. BOX 532658 ATLANTA, GA 30353-2658 USA

REWRITE INFORMATION

Original: 56855339 (1)

Original Date Out: 09/15/16 02:48 PM

Original Expected Return: 09/22/16

Previous: 57298218 (5)

Current: 57388330 (6)

CHARGES

Type	Quantity	Unit of Meas	Rate	Charge
Unit #:622831	1	Week	\$225.00	\$225.00
Mileage Out: 167,408 In: 167,758	350	Miles	\$0.0600	\$21.00
environmental fee	1 Week @ \$15.00			\$15.00
SUBTOTAL:				\$261.00

TAXES

FL SALES TAX

\$18.27

TOTAL DUE: \$279.27

PAYMENTS AND REFUNDS

Pay Type	Trans	Date	Card #	Approval Code	
AE	PYMT	11/15/2016	xxxxxxxxxx1008	175434 on 10/27/2016	(\$279.27)
PAYMENT:					(\$279.27)
NET DUE:					\$0.00

Customer acknowledges that Customer has read, or been given an opportunity to read, the Rental Agreement, including this Cover Sheet, the General Terms and Conditions, as well as any attachments hereto and agrees to be fully bound by its terms. To the extent the Customer had purchased Limited Damage Waiver coverage, Customer acknowledges reading, understanding, and agreeing with the disclosures, exclusions, and terms and conditions applicable to Limited Damage Waiver as set forth in Attachment D to the Rental Agreement.

By: _____

Customer/Authorized Signatory

Rental Agreement Cover Sheet

24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:57617189

Created by: M.MALTERER
Completed by: M.MALTERER
Entered At: 0726-10
Status: REWRITTEN

COMMERCIAL LOCAL

Pick Up Date: 11/03/16 02:48 PM
Expected Drop-Off: 11/10/16 02:48 PM
Actual Drop-Off: 11/10/16 02:48 PM
End Bill Date: 11/10/16 02:48 PM
Batch: 5028 on 11/23/16

CUSTOMER INFORMATION

Acct: 30P89L00 - 0726
PGT TRANSPORT
Attn: TERESITA
10302 NW SOUTH RIVER DR
MEDLEY, FL 33178-1310 USA
Store/Location # PGT TRANSPORT
Day (305) 885-5151

PICK UP/DROP OFF LOCATION

PENSKE MIAMI WEST (0726-10)
13000 NW SOUTH RIVER DR
MEDLEY, FL 33178 USA
Voice (305) 463-6006
Fax (305) 884-8265

DRIVER NAME(S): JOSE GOMEZ**TRAVEL SCOPE: Intrastate**

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

UNIT INFORMATION

Unit #:622831
7048 - 53FT T/A VAN TRAILER
License #: 5008CI
License State: FL
License Exp:
Owning Location: 0726-10

Max. Payload: 67,000 lbs.
Height: 13 ft.6 in.

Rented With Damage: NO
Returned With Damage: NO
Mileage Out: 167,758
Mileage In: 168,058
Fuel Out: EMPTY
Fuel In: EMPTY

NO HAZARDOUS MATERIAL BEING TRANSPORTED

OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility ***DECLINED***

Limited Damage Waiver/LDW \$5000 Responsibility ***DECLINED***

Liability Coverage/LIABILITY ACCIDENT INSURANCE ***CUSTOMER PROVIDES***
Policy # 16942 Expires 12/01/16

Failure to return the property or equipment upon expiration of the rental period and failure to pay all amounts due (including costs for damage to the property or equipment) are prima facie evidence of the intent to defraud, punishable in accordance with Section 812.155, Florida Statutes.

X _____ Initials

THIS CONTRACT OFFERS, FOR ADDITIONAL CHARGE OPTIONAL VEHICLE PROTECTION TO COVER YOUR FINANCIAL RESPONSIBILITY FOR DAMAGE OR LOSS TO THE RENTAL VEHICLE. THE PURCHASE OF OPTIONAL VEHICLE PROTECTION IS OPTIONAL AND MAY BE DECLINED. YOU ARE ADVISED TO CAREFULLY CONSIDER WHETHER TO PURCHASE THIS PROTECTION IF YOU HAVE A RENTAL VEHICLE COLLISION COVERAGE PROVIDED BY YOUR CREDIT CARD OR AUTOMOBILE INSURANCE POLICY. BEFORE DECIDING WHETHER TO PURCHASE OPTIONAL VEHICLE PROTECTION, YOU MAY WISH TO DETERMINE WHETHER YOUR CREDIT CARD OR VEHICLE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF DEDUCTIBLE UNDER SUCH COVERAGE.

Rental Agreement Cover Sheet

24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:57617189**COMMERCIAL LOCAL**

Created by:	M.MALTERER	Pick Up Date:	11/03/16 02:48 PM
Completed by:	M.MALTERER	Expected Drop-Off:	11/10/16 02:48 PM
Entered At:	0726-10	Actual Drop-Off:	11/10/16 02:48 PM
Status:	REWRITTEN	End Bill Date:	11/10/16 02:48 PM
Customer Name:	PGT TRANSPORT	Batch:	5028 on 11/23/16
Created On:	11/15/16 09:18 PM	Changed On:	11/23/16 08:58 PM

BILLING INFORMATION

Invoice #: PO #: Billing Cycle: Weekly

Bill Start Date: 11/03/16 02:48 PM Next Billing: 11/10/16

Remit To: PENSKE TRUCK LEASING CO.,L.P. - P.O. BOX 532658 ATLANTA, GA 30353-2658 USA

REWRITE INFORMATION

Original: 56855339 (1) Original Date Out: 09/15/16 02:48 PM
Original Expected Return: 09/22/16 Previous: 57388330 (6) Current: 57617189 (7)

CHARGES

Type	Quantity	Unit of Meas	Rate	Charge
Unit #:622831	1	Week	\$225.00	\$225.00
Mileage Out: 167,758 In: 168,058	300	Miles	\$0.0600	\$18.00
environmental fee	1 Week @ \$15.00			\$15.00
SUBTOTAL:				\$258.00

TAXES

FL SALES TAX \$18.06

TOTAL DUE: \$276.06

PAYMENTS AND REFUNDS

Pay Type	Trans	Date	Card #	Approval Code	
AE	PYMT	11/23/2016	xxxxxxxxxxx1008	125661 on 11/15/2016	(\$276.06)
PAYMENT:					(\$276.06)
NET DUE:					\$0.00

Customer acknowledges that Customer has read, or been given an opportunity to read, the Rental Agreement, including this Cover Sheet, the General Terms and Conditions, as well as any attachments hereto and agrees to be fully bound by its terms. To the extent the Customer had purchased Limited Damage Waiver coverage, Customer acknowledges reading, understanding, and agreeing with the disclosures, exclusions, and terms and conditions applicable to Limited Damage Waiver as set forth in Attachment D to the Rental Agreement.

By: _____

Customer/Authorized Signatory

Rental Agreement Cover Sheet

24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:57718354

Created by: M.MALTERER
Completed by: M.MALTERER
Entered At: 0726-10
Status: REWRITTEN

COMMERCIAL LOCAL

Pick Up Date: 11/10/16 02:48 PM
Expected Drop-Off: 11/17/16 02:48 PM
Actual Drop-Off: 11/17/16 02:48 PM
End Bill Date: 11/17/16 02:48 PM
Batch: 5034 on 11/30/16

CUSTOMER INFORMATION

Acct: 30P89L00 - 0726
PGT TRANSPORT
Attn: TERESITA
10302 NW SOUTH RIVER DR
MEDLEY, FL 33178-1310 USA
Store/Location # PGT TRANSPORT
Day (305) 885-5151

PICK UP/DROP OFF LOCATION

PENSKE MIAMI WEST (0726-10)
13000 NW SOUTH RIVER DR
MEDLEY, FL 33178 USA
Voice (305) 463-6006
Fax (305) 884-8265

DRIVER NAME(S): JOSE GOMEZ

TRAVEL SCOPE: Intrastate

This lessor cooperates with all Federal, State, and local law enforcement officials nationwide to provide the identity of customers who operate this rental CMV

UNIT INFORMATION

Unit #:622831
7048 - 53FT T/A VAN TRAILER
License #: 5008CI
License State: FL
License Exp:
Owning Location: 0726-10

Max. Payload: 67,000 lbs.
Height: 13 ft.6 in.

Rented With Damage: NO
Returned With Damage: NO
Mileage Out: 168,058
Mileage In: 168,358
Fuel Out: EMPTY
Fuel In: EMPTY

NO HAZARDOUS MATERIAL BEING TRANSPORTED

OPTIONAL PROTECTION PLANS

Limited Damage Waiver/LDW \$1000 Responsibility *DECLINED*

Limited Damage Waiver/LDW \$5000 Responsibility *DECLINED*

Liability Coverage/LIABILITY ACCIDENT INSURANCE *CUSTOMER PROVIDES*
Policy # 16942 Expires 12/01/16

Failure to return the property or equipment upon expiration of the rental period and failure to pay all amounts due (including costs for damage to the property or equipment) are prima facie evidence of the intent to defraud, punishable in accordance with Section 812.155, Florida Statutes.

X _____ Initials

THIS CONTRACT OFFERS, FOR ADDITIONAL CHARGE OPTIONAL VEHICLE PROTECTION TO COVER YOUR FINANCIAL RESPONSIBILITY FOR DAMAGE OR LOSS TO THE RENTAL VEHICLE. THE PURCHASE OF OPTIONAL VEHICLE PROTECTION IS OPTIONAL AND MAY BE DECLINED. YOU ARE ADVISED TO CAREFULLY CONSIDER WHETHER TO PURCHASE THIS PROTECTION IF YOU HAVE A RENTAL VEHICLE COLLISION COVERAGE PROVIDED BY YOUR CREDIT CARD OR AUTOMOBILE INSURANCE POLICY. BEFORE DECIDING WHETHER TO PURCHASE OPTIONAL VEHICLE PROTECTION, YOU MAY WISH TO DETERMINE WHETHER YOUR CREDIT CARD OR VEHICLE INSURANCE AFFORDS YOU COVERAGE FOR DAMAGE TO THE RENTAL VEHICLE AND THE AMOUNT OF DEDUCTIBLE UNDER SUCH COVERAGE.

Rental Agreement Cover Sheet

24/7 Roadside Assistance:
1-800-526-0798

Rental Agreement #:57718354

COMMERCIAL LOCAL

Created by: M.MALTERER
Completed by: M.MALTERER
Entered At: 0726-10
Status: REWRITTEN
Customer Name: PGT TRANSPORT
Created On: 11/23/16 08:58 PM

Pick Up Date: 11/10/16 02:48 PM
Expected Drop-Off: 11/17/16 02:48 PM
Actual Drop-Off: 11/17/16 02:48 PM
End Bill Date: 11/17/16 02:48 PM
Batch: 5034 on 11/30/16
Changed On: 11/30/16 03:26 PM

BILLING INFORMATION

Invoice #: PO #: Billing Cycle: Weekly

Bill Start Date:11/10/16 02:48 PM Next Billing: 11/17/16

Remit To: PENSKE TRUCK LEASING CO.,L.P. - P.O. BOX 532658 ATLANTA, GA 30353-2658 USA

REWRITE INFORMATION

Original: 56855339 (1) Original Date Out: 09/15/16 02:48 PM
Original Expected Return: 09/22/16 Previous: 57617189 (7) Current: 57718354 (8)

CHARGES

Type	Quantity	Unit of Meas	Rate	Charge
Unit #:622831	1	Week	\$225.00	\$225.00
Mileage Out: 168,058 In: 168,358	300	Miles	\$0.0600	\$18.00
environmental fee	1 Week @ \$15.00			\$15.00
SUBTOTAL:				\$258.00

TAXES

FL SALES TAX \$18.06

TOTAL DUE: \$276.06

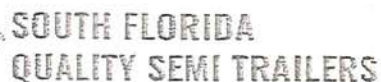
PAYMENTS AND REFUNDS

Pay Type	Trans	Date	Card #	Approval Code	
AE	PYMT	11/30/2016	xxxxxxxxxxx1008	128629 on 11/23/2016	(\$276.06)
PAYMENT:					(\$276.06)
NET DUE:					\$0.00

Customer acknowledges that Customer has read, or been given an opportunity to read, the Rental Agreement, including this Cover Sheet, the General Terms and Conditions, as well as any attachments hereto and agrees to be fully bound by its terms. To the extent the Customer had purchased Limited Damage Waiver coverage, Customer acknowledges reading, understanding, and agreeing with the disclosures, exclusions, and terms and conditions applicable to Limited Damage Waiver as set forth in Attachment D to the Rental Agreement.

By: _____

Customer/Authorized Signatory



Ph. 305.978.9115

TO:

PGT Transport

TERMS:

INVOICE No 1042

PHONE	DATE OF ORDER 11-11-16
FAX	CUSTOMER ORDER NUMBER
<input type="checkbox"/> DAY WORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA	
JOB NAME/NUMBER	
JOB LOCATION	
JOB PHONE	STARTING DATE

[illegible]

Karen DeMaria

From: Gary Volenec
Sent: Wednesday, February 01, 2017 9:24 AM
To: Karen DeMaria
Cc: Timothy Carter
Subject: FW: 1103-1105 Simonton Street mahogany tree

Karen – Tim went out and looked at the situation. Based on the lateral overhang of the limb over the lane as well as the bus stop across the street, jogging the striping is not really an option.

Thanks,
Gary

Gary J. Volenec, P.E.

City Engineer
City of Key West
305 809-3967



From: Timothy Carter
Sent: Wednesday, February 01, 2017 9:18 AM
To: Gary Volenec <gvolenec@cityofkeywest-fl.gov>
Subject: RE: 1103-1105 Simonton Street mahogany tree

I measured 24' too. There is about 6' or 7' extra near the tree but it is the bus stop in front of the Gato Building... We could shift it over but it would put traffic in the bus stop. Also, to me it looks like the low part of the tree covers almost the whole northbound lane, so I don't think shifting the lane would work. The semi trucks would still clip the tree because they wouldn't be able to jog in and out quickly enough. Just my thoughts. If you want I'll go out and look at it in the field this afternoon.

From: Gary Volenec
Sent: Tuesday, January 31, 2017 3:46 PM
To: Timothy Carter <tcarter@cityofkeywest-fl.gov>
Subject: FW: 1103-1105 Simonton Street mahogany tree

Please measure the roadway width and give me your best guess on the potential to move the lane over by striping.

Thanks,
Gary

From: Karen DeMaria

Sent: Tuesday, January 31, 2017 3:36 PM

To: Gary Volenec <gvolenec@cityofkeywest-fl.gov>; Timothy Carter <tcarter@cityofkeywest-fl.gov>

Subject: 1103-1105 Simonton Street mahogany tree

Gary/Tim:

The City Manager has asked that I request removal of the Mahogany tree across from the Gato Building on Simonton Street from the Tree Commission. This is the tree that a semi got stuck under a few months ago. It appears that one of the main trunk branches is less than 14 ft over the roadway area.

This tree is one of the historic mahogany trees and I am trying to gathering as much info for the file for the meeting. One of the alternatives to removal that came up was can the road stripping be changed with a shift of the travel lanes away from the tree and toward the Gato building. I need something in writing in my file as to an answer to this question. Can you help me please.

Sincerely,

Karen

Karen DeMaria
Urban Forestry Manager/Tree Commission
Certified Arborist
305-809-3768