

# STAFF REPORT

DATE: June 1, 2017

RE: **1116 Varela Street (permit application # T17-8502)**

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

An application was received requesting the removal of **(1) Strangler Fig** and **(1) Gumbo Limbo tree**. A site inspection was done on May 24, 2017 and documented the following:





Tree Species: Strangler Fig (*Ficus aurea*)











05/24/2017











Diameter: 28.6"

Location: 60% (rear corner of property at fence line, new pool installed nearby-property recently redeveloped)

Species: 100% (on protected tree list)

Condition: 70% (fair to good, tree has been overlifted but no obvious signs of decay or health issues)

Total Average Value = 76%

**Value x Diameter = 21.7 replacement caliper inches**

Tree Species: Gumbo Limbo (*Bursera simaruba*)









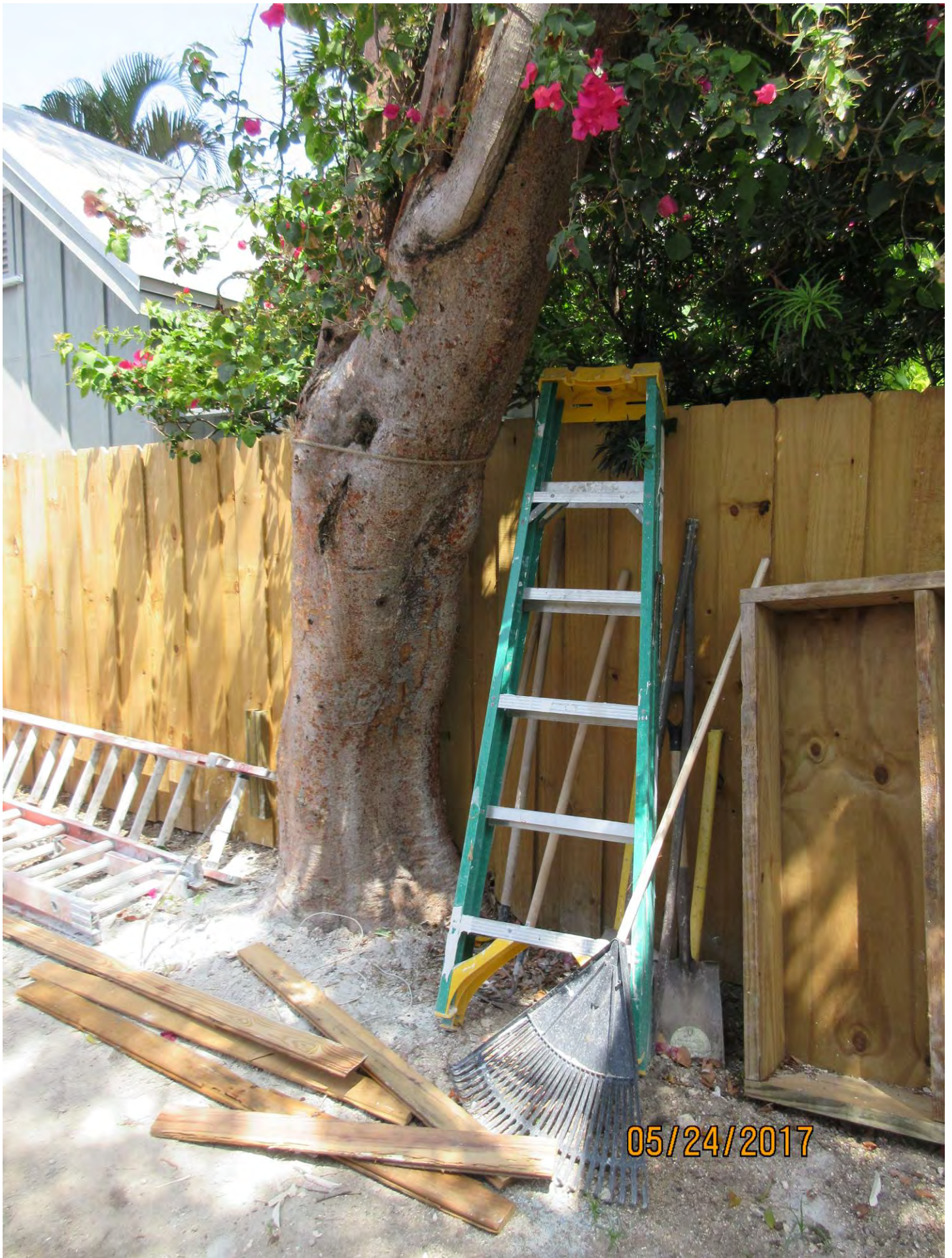






05/24/2017









05/24/2017









Diameter: 20"

Location: 70% (along side property line)

Species: 100% (on protected tree list)

Condition: 40% (poor, old large tear in main trunk, decay)

Total Average Value = 70%

**Value x Diameter = 14 replacement caliper inches**

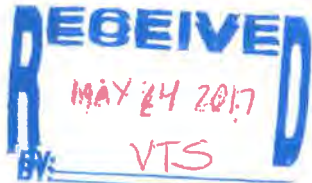
### **Recommendation:**

- 1. Recommend approval of the removal of one (1) Gumbo Limbo tree at 1116 Varela Street to be replaced with 14 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted on site.**
- 2. Recommend denial of the removal of the strangler Fig tree in accordance with Sec 110-328 (1) species, size, and health of tree.**



# Application





Removal-  
Canopy

8502

## Tree Permit Application

Date: 5-24-2017

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1116 Varela St.  
Cross/Corner Street Virginia St.  
List Tree Name(s) and Quantity 1 Strangler Fig 1 Gumbo Limbo  
Species Type(s) check all that apply ( ) Palm ( ) Flowering ( ) Fruit (X) Shade ( ) Unsure  
Reason(s) for Application:

(X) REMOVE ( ) Tree Health (X) 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 The Gumbo Limbo has a terrible structure and has suffered a storm related rip out of a large limb which it will never recover from. The only way the Strangler Fig will have enough room is if the buildings are taken away and the tree moved to the center of the lot.

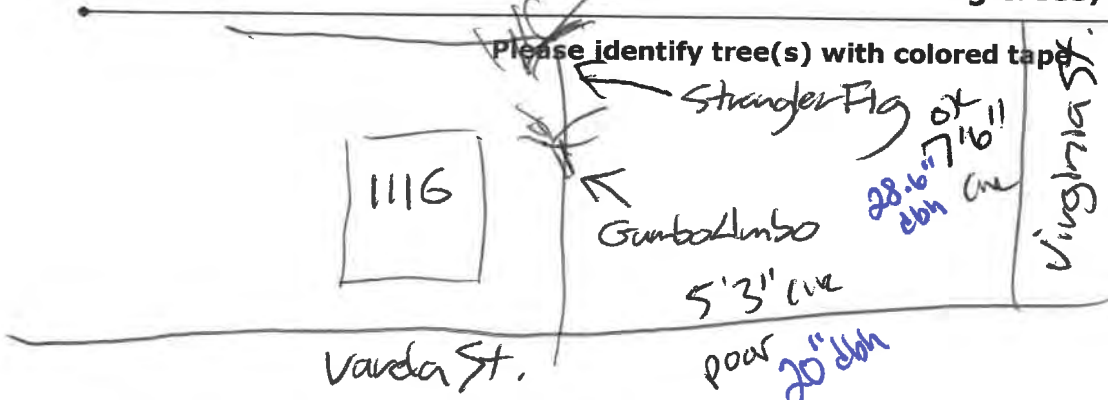
Property Owner Name K. Shawn Chapman  
Property Owner eMail Address \_\_\_\_\_  
Property Owner Mailing Address 11257 Golf Course Rd  
Property Owner Mailing City Ocean City State Maryland Zip 21842  
Property Owner Phone Number ( ) - -  
Property Owner Signature \_\_\_\_\_

Representative Name Kenneth King  
Representative eMail Address \_\_\_\_\_  
Representative Mailing Address 1602 Calld St.  
Representative Mailing City Key West State FL Zip 33040  
Representative Phone Number (305) 396-8101

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 >>>>>



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: FEB. 28, 2017

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 1116 VAPELA ST.

Property Owner Name K SHAWN HAPMAN

Property Owner eMail Address shawn@bahia.marina.com

Property Owner Mailing Address 10257 GOLF COURSE RD.

Property Owner Mailing City OCEAN CITY State MD Zip 21842

Property Owner Phone Number (443) 497-0986

Property Owner Signature [Signature]

Representative Name Kenneth King

Representative eMail Address 1602 Lakota St.

Representative Mailing Address Key West State FL Zip 33040

Representative Mailing City Key West State FL Zip 33040

Representative Phone Number (305) 296-8101

I K. SHAWN HAPMAN, 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 28th day FEBRUARY 2017

By (Print name of Affiant) K SHAWN HAPMAN who is personally known to me or has produced \_\_\_\_\_ as identification, and who did take an oath.

**NOTARY PUBLIC**

Sign Name: [Signature]

Notary Public - State of Florida (seal)

Print Name: TERI JOHNSTON

My Commission Expires: 3/8/19

