

STAFF REPORT

DATE: February 28, 2018

RE: **526 William Street (permit application # T18-8883)**

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

An application was received requesting the removal of **(1) Royal Poinciana tree**. A site inspection was done on February 22, 2018 and documented the following:

Tree Species: Royal Poinciana (Delonix regia)







02/22/2018











02/22/2018



02/22/2018



02/22/2018





Diameter: 20.7"

Location: 70% (minor canopy impacts to utility feeder lines)

Species: 100% (on protected tree list)

Condition: 30% (poor, structural damage to main trunk from hurricane, half of canopy torn off, cracks in main trunk)

Total Average Value = 66%

Value x Diameter = 13.6 replacement caliper inches

Recommendation: Recommend approval of the removal of one (1) Royal Poinciana tree at 526 William Street to be replaced with 13.6 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted on site.

Application



Canopy Removal

8883

Tree Permit Application

Date: 2-21-2018

Please Clearly Print All Information unless indicated otherwise.

Tree Address 526 William St.
Cross/Corner Street Southard St.
List Tree Name(s) and Quantity 1 Poinciana
Species Type(s) check all that apply () Palm (X) Flowering () Fruit () Shade () Unsure
Reason(s) for Application:

(X) REMOVE (X) Tree Health (X) Safety () Other/Explain below
() TRANSPLANT () New Location () Same Property () Other/Explain below
() HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction

Additional Information and Explanation Tree was badly damaged during Hurricane Irma and has become a hazard.

Property Owner Name Delancy Hall Hoa
Property Owner eMail Address DM-asset@a+homekeywest.com
Property Owner Mailing Address 526 William St.
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (305) 296-6996
Property Owner Signature

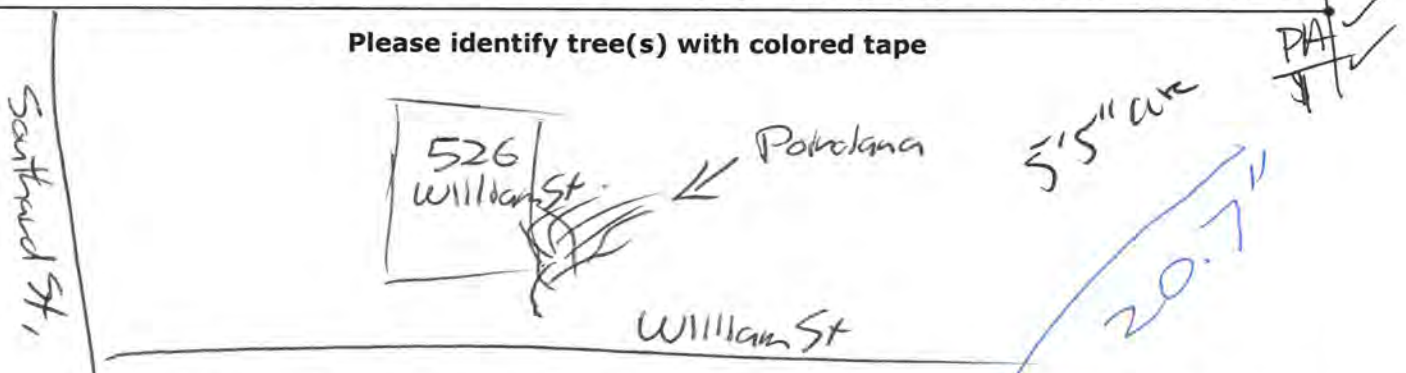
Representative Name Kenneth King
Representative eMail Address
Representative Mailing Address 1602 Land St.
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 296-8101

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: 2-16-2018

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 526 William St

Property Owner Name Delancy Hall HOA

Property Owner eMail Address Pm-AssT @ AThomekeywest.com

Property Owner Mailing Address 526 William St, Key West FL 33040

Property Owner Mailing City Key West State FL Zip 33040

Property Owner Phone Number (305) 296 - 6996

Property Owner Signature [Signature] AT HOME IN KEY WEST - AGENT FOR OWNERS

Representative Name Kenneth King

Representative eMail Address _____

Representative Mailing Address 1602 Laird St

Representative Mailing City Key West State FL Zip 33040

Representative Phone Number (305) 296 - 8101

I, Robin Van Mater / AT HOME IN KEY WEST, INC 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 is there is any questions or need access to my property.

Property Owner Signature

[Signature] AGENT FOR OWNER

The forgoing instrument was acknowledged before me on this 16th day February.

By (Print name of Affiant) Robin Van Mater who is personally known to me or has produced _____ as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Theresa Moen

Notary Public - State of Florida (seal)

Print Name: Theresa Moen

My Commission Expires: 3/7/2021

