

STAFF REPORT

DATE: January 29, 2020

RE: 619 Grinnell Street (permit application # T2020-0018)

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

An application was received requesting the removal of (1) Mango tree. A site inspection was done and documented the following:

Tree Species: Mango (*Mangifera indica*)



Photo showing location of tree.



Photo of tree canopy, view 1.

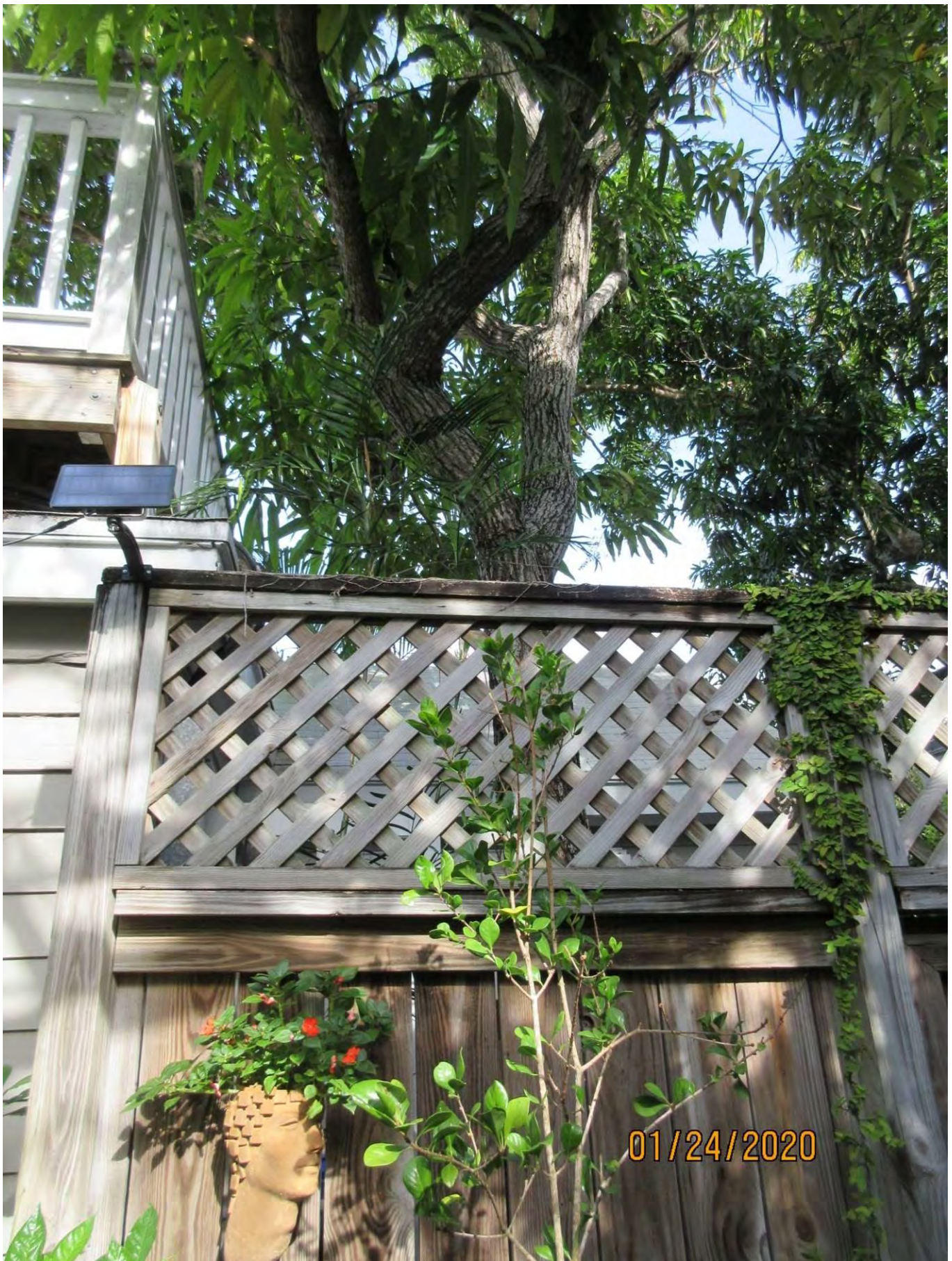


Photo showing tree trunk and location of tree near property line.



Photo showing entire tree.



Photo showing tree trunk, view 1.



Photo of tree canopy, view 2.



View of base of tree and deck.

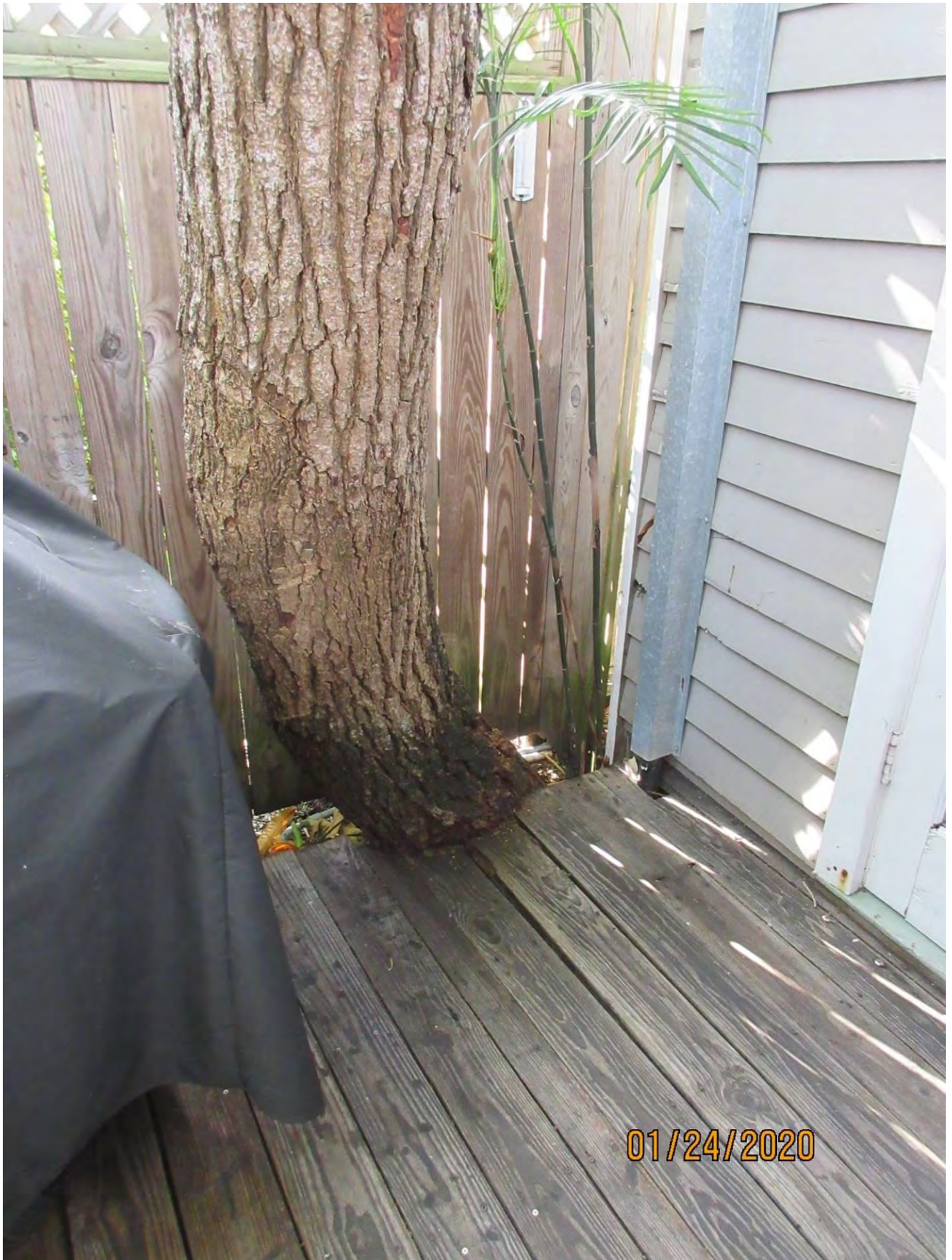


Photo of tree trunk and base of tree.



Photo showing tree trunk and canopy.

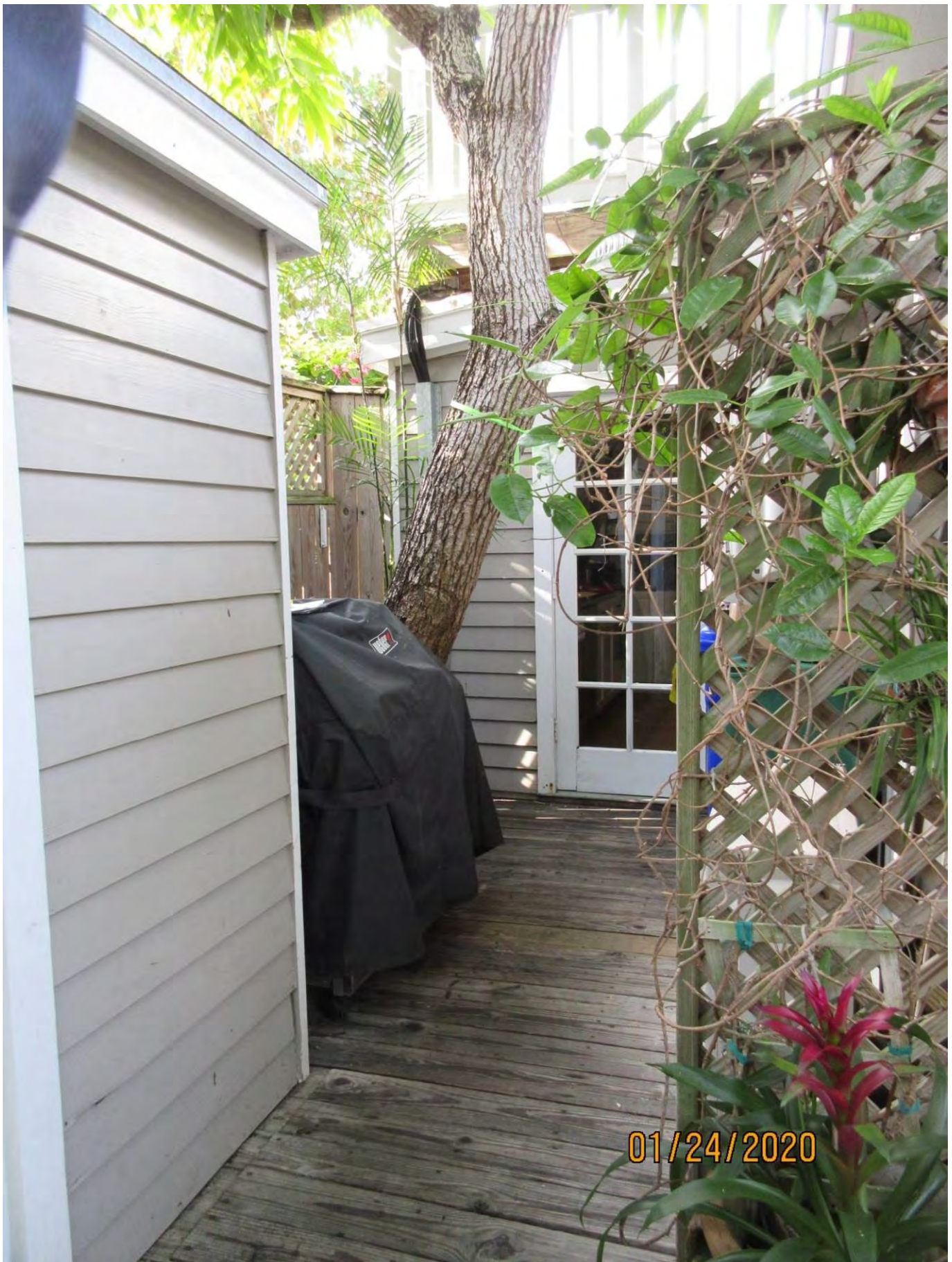


Photo of tree trunk, view 2.

Diameter: 13.3"

Location: 50% (back yard tree, close to property line, growing into deck)

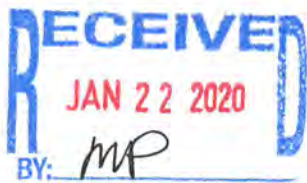
Species: 100% (on protected tree list)

Condition: 70% (fair-overall good health with a damaged main trunk.)

Total Average Value = 73%

Value x Diameter = 9.7 replacement caliper inches

Application



T2020-0018

Tree Permit Application

Date: 1-22-2020

Please Clearly Print All Information unless indicated otherwise.

Tree Address 619 Grinnell St.
Cross/Corner Street Angela St.
List Tree Name(s) and Quantity 1 Mango tree
Species Type(s) check all that apply () Palm () Flowering (X) Fruit () Shade () Unsure
Reason(s) for Application:

(X) REMOVE () 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 The tree's canopy grows over and threatens the house. The trunk has been pushing into the deck ever since ~~the~~ it shifted during a hurricane years ago.

Property Owner Name Marie Mathews
Property Owner eMail Address _____
Property Owner Mailing Address 619 Grinnell St.
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (305) 294-2235
Property Owner Signature _____

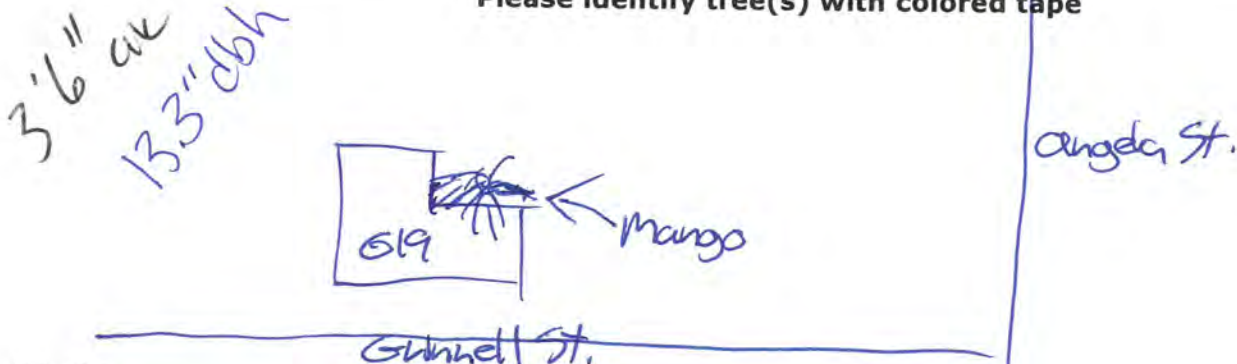
Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Laid St.
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 296-8101

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.

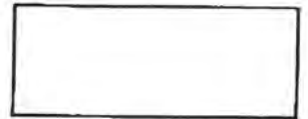
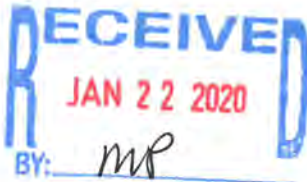
Tree Representation Authorization form attached ()

<<<<< 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: January 20th 2020

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 619 GRINNELL Street Key West

Property Owner Name Marie Mathews
Property Owner eMail Address mchaixmathews@aol.fr
Property Owner Mailing Address 619 GRINNELL Street
Property Owner Mailing City State FL Zip 33040
Property Owner Phone Number (305) 294-2235
Property Owner Signature mchaix

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

I Marie Mathews, 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 mchaix

The forgoing instrument was acknowledged before me on this 20th day JANUARY 2020

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

NOTARY PUBLIC

Sign Name: Deems Webster

Notary Public - State of Florida (seal)

Print Name: Deems Webster

My Commission Expires: April 29 2020

