

AGENDA ITEM #

City of Key West Tree Commission

Tree Permit Application

PO Box 1409
Key West, FL 33040
Phone: 305-809-3764
Fax: 305-809-3978

Home/Property Owner: L. Philippe Phillips Date: 1-22-2012

Mailing Address: 715 Fleming St.

Owner Signature: _____ Owner Ph#: (305) 294-6059

Represented by: Kenneth Kho Rep. Ph#: (305) 296-8101

Represented by mailing address: 1602 Laird St. Key West, FL 33040

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.

A letter of representation from the owner must accompany this application if the owner is unable to attend.

Letter of Representation ()

Tree(s) Address: 715 Fleming St. Cross/Corner Street: William St.

Common Name(s): 2 Jamaica Dogwood Scientific Name(s): _____

Species Type(s) {check all that apply}: () Palm () Flowering () Fruit () Shade

Reason(s) for Application {check all that apply}:

<input checked="" type="checkbox"/> REMOVE	<input type="checkbox"/> TRANSPLANT	<input type="checkbox"/> HEAVY MAINTENANCE
<input type="checkbox"/> Tree Health	<input type="checkbox"/> New Location	<input type="checkbox"/> Branch Removal
<input checked="" type="checkbox"/> Safety	<input type="checkbox"/> Same Property	<input type="checkbox"/> Crown Cleaning/Thinning
<input type="checkbox"/> Other / Explain	<input type="checkbox"/> Other / Explain	<input type="checkbox"/> Crown Reduction

Reason(s) for request:

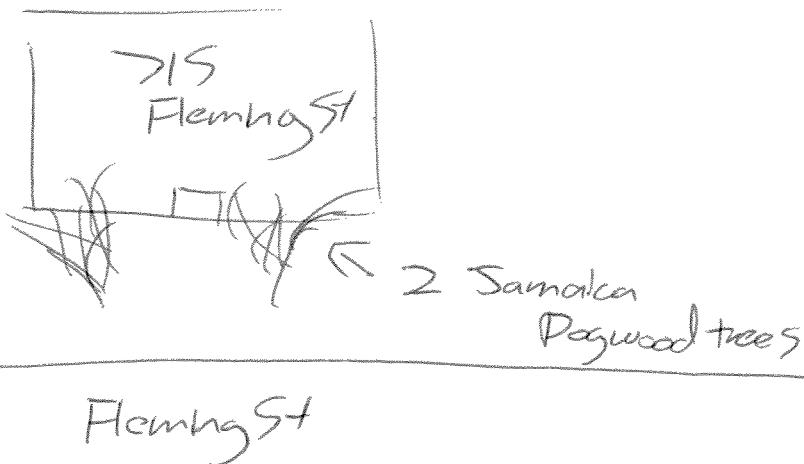
Both Jamaica Dogwood trees have already caused significant damage to the retaining wall which holds in the front yard and prevents it from falling out onto the sidewalk. The roots have also caused structural damage to the house and sidewalk.

Replacement plant material must be Florida Grade #1. Replacement of a palm with a native palm is required. Replacement of a canopy tree with a native canopy tree is required. If you need assistance with replacements, please call the Landscape Department at 305-809-3764.

<<<< Sketch location of tree in this area including cross/corner Street >>>>

Provide access for viewing tree(s) prior to meeting
Identify tree(s) with colored tape

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Tree Species _____

Circumference _____ $\div 3.14 =$ diameter _____

Location _____ % Species _____ % Condition _____ % Total Average Value _____ %

Avg. value _____ X _____ Diameter = _____

Replacement Inches

LOCATION: OLD CITY HALL, 510 GREENE STREET, 5:00 p.m.

FOR TREE COMMISSION USE ONLY.

TABLED APPROVED DENIED FURTHER ACTION

COMMENTS:

CHAIRPERSONS SIGNATURE/DATE

City Engineer comments if required:

ENGINEER'S SIGNATURE/DATE

AUTHORIZATION LETTER

L. Philippe Phillips
(owner address)

715 Fleming St.

Key West, FL 33040

Dear Tree Commissioners:

This letter is authorization and confirmation that I, L. Philippe Phillips
(owner name)
have retained Kenneth King to represent me in the matter
(representative name)

obtaining a permit from the City of Key West for my property at 715 Fleming St
(address)
Key West, FL 33040. You may contact me at 305 294 6059. Thank you.
(telephone number)

sincerely,

L. P. Phillips
(owner signature)

City of Key West Tree Commission
Public Works Facility
633 Palm Avenue
Key West, FL 33040
Office: (305)-809-3764
Fax: (305)-296-6152