

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: Wendy Hallgren Date: 2-12-2012

Mailing Address: 1425 Newton St.

Owner Signature: \_\_\_\_\_ Owner Ph#: (305) 294-9573

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

Represented by mailing address: 1602 Land 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: 1425 Newton St. Cross/Corner Street: \_\_\_\_\_

Common Name(s): Mahogany Scientific Name(s): \_\_\_\_\_

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

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

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

Reason(s) for request:

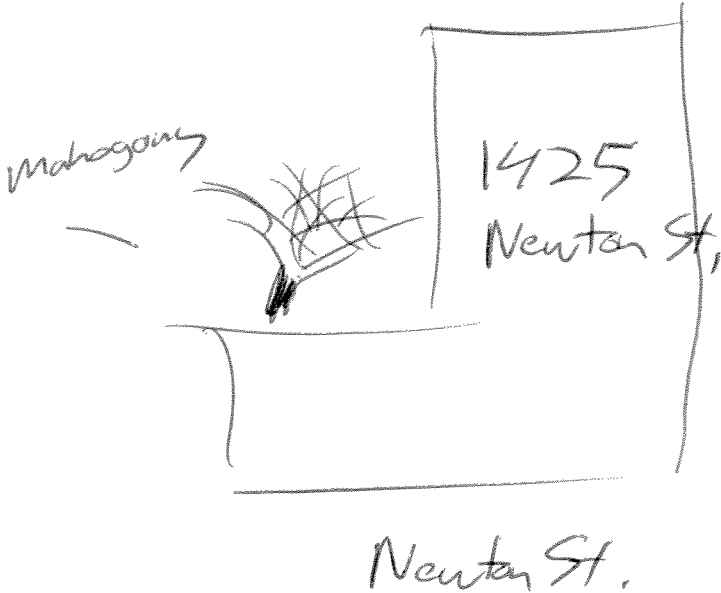
Years ago a large limb ripped off the trunk about eight feet from the ground. Subsequent decay combined with termite and ant damage has reduced the diameter of trunk holding up the canopy by half. This tree should qualify as an emergency.

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 \_\_\_\_\_ ÷ 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**

FEB 13 2012

*W. Hallgren*

Wendy Hallgren  
(owner address)

1425 Newton St.

Key West, Fl 33040

Dear Tree Commissioners:

This letter is authorization and confirmation that I, Wendy Hallgren,  
(owner name)  
have retained ~~Golden Bough~~ Kenneth King to represent me in the matter  
(representative name)

obtaining a permit from the City of Key West for my property at 1425 Newton St.  
(address)

. You may contact me at \_\_\_\_\_  
305-294-9573 or 802-291-0813. Thank you.  
(telephone number)

sincerely,

*Wendy Hallgren*  
(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