

STAFF REPORT

DATE: April 22, 2014

RE: 1119 Olivia Street (permit application #6837)

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

An application was received for the removal of **(1) Pink Tabebuia tree**. A site inspection was done on March 28, 2014 and documented the following:

Tree Species: Pink Tabebuia (*Tabebuia heterophylla*)



Diameter: 26" – 24" = 2" regulated

Location: 60% (next to driveway, close to sidewalk-root issues)

Species: 0% (on not protected tree list)

Condition: 50% (Fair to poor, lots of bur growths on main trunk)

Total Average Value = 36%

Value x Diameter = **0.7 replacement caliper inches**



Recommendations: Recommend approval of the removal of (1) Pink Tabebuia tree located at 1119 Olivia Street, to be replaced with 0.7" caliper inches of FL#1 native dicot or fruit tree.

Application



6837

Tree Permit Application

Date: 4-7-2014

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1119 Olivia St.
Cross/Corner Street Ash
List Tree Name(s) and Quantity Pink Tabebuia
Species Type(s) check all that apply () Palm (X) Flowering () Fruit (X) Shade () Unsure
Reason(s) for Application:

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
Other/Explain This not very large yard already has a bunch of big canopy trees. This one is in the worst location hanging over the driveway and also slowing down damage with its roots.
Reason for Request and also slowing down damage with its roots.

Property Owner Name Lynn Hallum
Property Owner eMail Address Lynn Hallum 195 @ comcast.net
Property Owner Mailing Address 1119 Olivia St.
Property Owner Mailing City Key West **State** FL **Zip** 33040
Property Owner Phone Number (615) 790-2129
Property Owner Signature _____

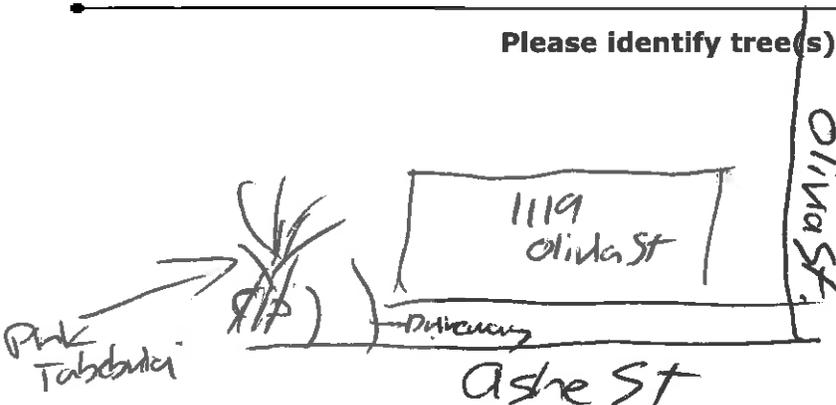
Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Laird St
Representative Mailing City Key West **State** FL **Zip** 33040
Representative Phone Number (305) 296-8101

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



3-28-14
 26" dbh
 C=50
 S=0
 L=60/36%
 = 0.7" replacement

If this process requires blocking of a City right-of-way, a separate ROW Permit is required. Please contact 305-809-3740.

LYNN M HALLUM

LYNNHALLUM195@COMCAST.NET

6837

195 STURBRIDGE DRIVE
FRANKLIN, TENNESSEE
37064

615-790-7179
[M] 615-975-0455

tion

Date: 4-2-14

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 1119 Olviast / on Ashes ide

Property Owner Name Lynn M. Hallum

Property Owner eMail Address Lynn Hallum 195@Comcast.net

Property Owner Mailing Address 195 Sturbridge Dr

Property Owner Mailing City Franklin State TN Zip 37064

Property Owner Phone Number (615) 790-7179 615-975-0455

Property Owner Signature Lynn M. Hallum

Representative Name Kenneth King

Representative eMail Address _____

Representative Mailing Address 1602 Land

Representative Mailing City La West State FL Zip 33090

Representative Phone Number (305) 298-8101

I Lynn M. Hallum, 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 are any questions or need access to my property.

Property Owner Signature Lynn M. Hallum

The forgoing instrument was acknowledged before me on this 2nd day of March, 2014.

By (Print name of Affiant) Lynn M. Hallum who is personally known to me or has produced Tennessee Driver License as identification and who did take an oath.

NOTARY PUBLIC
Sign Name: Lisa M. McCarthy Notary Public - State of Florida (seal)
Print Name: Lisa M. McCarthy

My Commission Expires: 