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Tree Permit Application

Please Clearly Print All Inform	nation unless indicated otherwise. Date: July 29, 2025			
Tree Addres	s 3201 Flagler Avenue Key West FL 33040.			
Cross/Corner Stree	t Please see attached site plan.			
List Tree Name(s) and Quantit	(1) Pigeon Plum (1) Crabwood (1) Lignum Vitae (1) Pitch Apple (1) Spanish Stopp			
Reason(s) for Application	:			
() Remove	e () Tree Health () Safety (X) Other/Explain below			
() Transplan	t () New Location () Same Property () Other/Explain below			
() Heavy Maintenance Trin	n () Branch Removal () Crown Cleaning/Thinning () Crown Reduction			
Additional Information and	The proposed project involves the redevelopment of the Property which was involuntarily destroyed by fire.			
Explanation	The previously existing original site plan did not include any trees. In an effort to collaborate constructively with the City, the Applicant has			
	revised the plan to incorporate landscaping improvements. As shown in the attached cite plan, the updated proposal includes the addition of 5 Trees			
Property Owner Name	FLAGLER CENTER III CONDOMINIUM ASSOCIATION			
Property Owner email Address	audrey@oropezastonescardenas.com			
Property Owner Mailing Address	3201 Flagler Avenue Key West, FL 33040			
Property Owner Phone Number	305-294-0252			
Property Owner Signature	1 Rah			
*Representative Name	Oropeza Stones & Cardenas PLLC.			
•	audrey@oropezastonescardenas.com			
Representative Mailing Address	221 Simonton St.			
Representative Phone Number	305-294-0252			
*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.				
As of August 1, 2022, application fee Sketch location of tree (aerial view regarding this application with color	es are required. Click here for the fee schedule. The including cross/corner street. Please identify tree(s) on the property			
Please see attached site plan.				

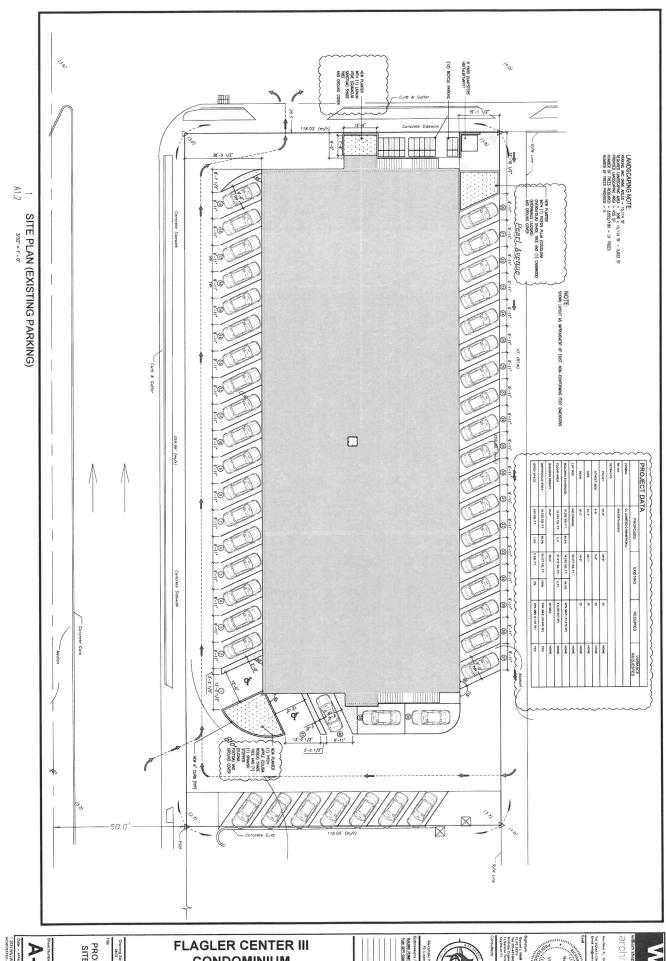


Tree Representation Authorization

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.

Date	July 29, 2025	
Tree Address	3201 Flagler Avenue Key West FL 33040.	
Property Owner Name	FLAGLER CENTER III CONDOMINIUM ASSOCIATION	
Property Owner Mailing Address	3201 Flagler Avenue Key West, FL 33040	
Property Owner Mailing City,		
State, Zip	3201 Flagler Avenue Key West, FL 33040	
Property Owner Phone Number	(305-294-0252	
Property Owner email Address	audrey@oropezastonescardenas.com	
Property Owner Signature	John Rahm	
Representative Name	Oropeza Stones & Cardenas PLLC.	
Representative Mailing Address	221 Simonton St. Key West, FL 33040	
Representative Mailing City,		
State, Zip	221 Simonton St. Key West, FL 33040	
Representative Phone Number	305-294-0252	
Representative email Address	audrey@oropezastonescardenas.com	
Steve Robbins	hereby authorize the above listed agent(s) to represer	
	m the City of Key West for my property at the tree address about	
You may contact me at the telephone	e listed above if there are any questions or need access to my pr	operty.
Property Owner Signature	Roll	
The forgoing instrument was acknown By (Print name of Affiant) Steve Robi	wledged before me on this 29 day July 2025 bins who is personally known to me or has produced as identification and who did take an oath.	_·
Notary Public	/VAA	
Sign name:		
Print name:	/ Audney Perry	
My Commission expires:	Notary Public-State of	(Seal)





A-1.2

PROPOSED SITE PLAN

CONDOMINIUM

3201 FLAGLER AVE., KEY WEST , FL RECONSTRUCTION OF EXIST. MIXED USE BUILDING







