

# STAFF REPORT

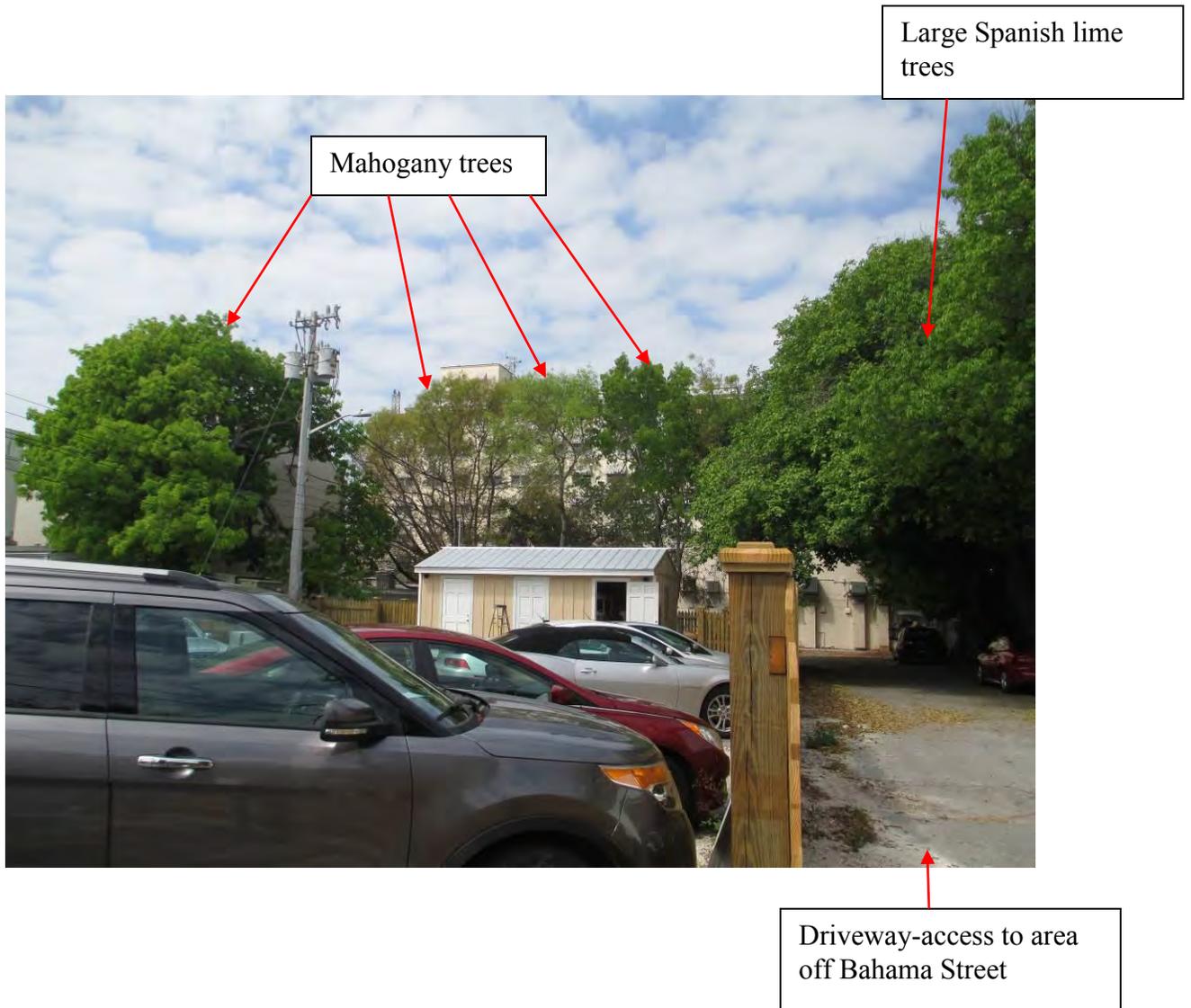
DATE: April 25, 2014

**RE: 419 Duval Street (back parking lot) (permit application #6860)**

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

An application was received for the removal of **(4) Mahogany trees**. A site inspection was done on April 24, 2014 and documented the following:

Tree Species: Mahogany (Swietenia mahagoni)





4

Gumbo limbo  
and young  
Spanish lime at  
utility pole

1

2

3

4





1. Diameter: 9.9”  
Location: 60% (being impacted by canopy of large Spanish lime tree)  
Species: 100% (on protected tree list)  
Condition: 30% (poor)  
Total Average Value = 63%  
Value x Diameter = **6 replacement caliper inches**





2. Diameter: 14"  
Location: 80%  
Species: 100% (on protected tree list)  
Condition: 60% (fair)  
Total Average Value = 80%  
Value x Diameter = **11 replacement caliper inches**





2

3

3. Diameter: 15.6"

Location: 80%

Species: 100% (on protected tree list)

Condition: 60% (fair)

Total Average Value = 80%

Value x Diameter = 12.5 **replacement caliper inches**



4. Diameter: 25.5"

Location: 40% (on property line, under utility lines)

Species: 100% (on protected tree list)

Condition: 20% (poor, decay, structure poor)

Total Average Value = 53%

Value x Diameter = **13.5 replacement caliper inches**









**Recommendations: Recommend approval of the removal of (2) Mahogany trees, tree #1 (6" replacement) and tree #4 (13.5" replacement) due to condition/health issues with the trees.**

**At this time, do not recommend the removal of tree #2 and #3. Additional information is required regarding potential construction to the area.**

NOTE: Other trees on property and photos of the whole parking area.



Existing gumbo limbo tree (4.5" diameter) and a young Spanish lime tree (7.3" diameter) at utility pole.







Karen DeMaria &lt;kdemaria@keywestcity.com&gt;

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**tree removal application at 419 Duval St (rear parking lot)**

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Karen DeMaria &lt;kdemaria@keywestcity.com&gt;

Mon, Apr 28, 2014 at 2:36 PM

To: rrappaport@att.net

Mr. Rappaport:

Ken King submitted an application for you for the removal of 4 mahogany trees in the rear parking lot of 419 Duval St. I have attached a copy of my staff report for you review. A copy has also been printed for Ken. This is what will be presented to the Tree Commission. If you disagree, please submit additional information.

At this time I can not recommend the approval of the removal of two of the trees (#2 and #3). The application states that you have an issue with flooding and you have construction plans including the building of a wall. I would need further documentation showing what your plans are to alleviate the flooding and what alternative plans have been reviewed. Tree #1 and #4 do have condition issues and I will recommend approval of their removal.

Sincerely,

Karen DeMaria

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Karen DeMaria  
Urban Forestry Manager  
Certified Arborist  
City of Key West  
305-809-3768

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 **6860 staff report 419 Duval St.doc**  
4143K

# Application



6860

# Tree Permit Application

Date: 4-23-2014

Please Clearly Print All Information unless indicated otherwise.

**Tree Address** 419 Duval St, Key West ( Back Parking lot  
**Cross/Corner Street** Eaton St  
**List Tree Name(s) and Quantity** Mahogany 4  
**Species Type(s) check all that apply** ( ) Palm ( ) Flowering ( ) Fruit (X) Shade ( ) Unsure  
**Reason(s) for Application:**

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

**Additional Information and Explanation** Owner has severe flooding problem and wants to remove the trees so that a wall can be constructed to control the problem. A couple of the trees are in bad shape, the others aren't that great either.

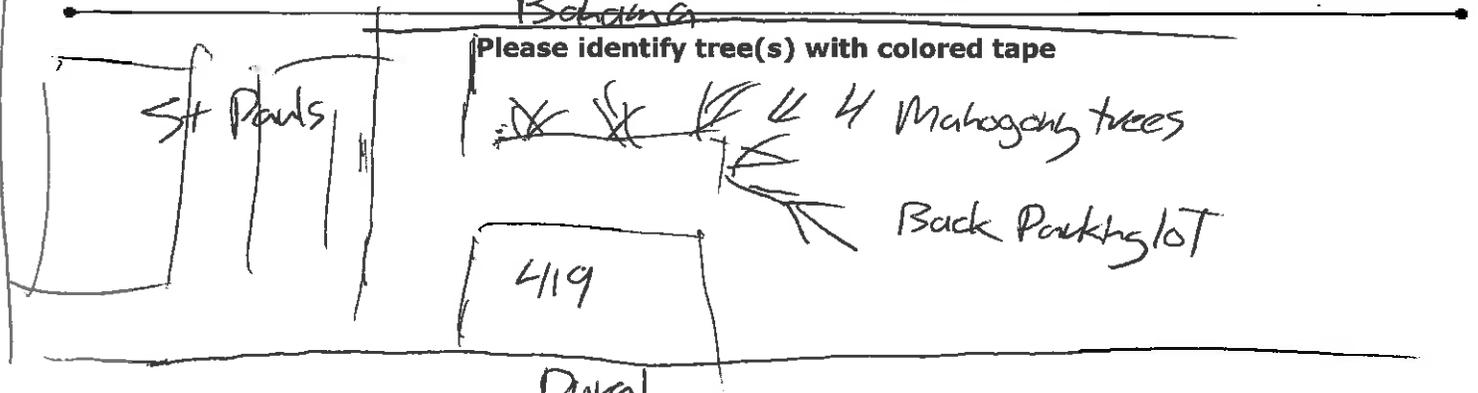
**Property Owner Name** Robert Rappaport  
**Property Owner eMail Address** \_\_\_\_\_  
**Property Owner Mailing Address** 1107 Key Plaza Box 330  
**Property Owner Mailing City** Key West **State** FL **Zip** 33040  
**Property Owner Phone Number** (305) 525-4333  
**Property Owner Signature** \_\_\_\_\_

**Representative Name** Kenneth Kling  
**Representative eMail Address** \_\_\_\_\_  
**Representative Mailing Address** 1602 Laurel 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 >>>>>



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



6860

### Tree Representation Authorization

Date: 4/16/14

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 419 DUVAL ST., KEY WEST (BACK PARKING LOT)

Property Owner Name ROBERT RAPPAPORT  
Property Owner eMail Address RLRAPPAPORT@ATT.NET  
Property Owner Mailing Address 1101 KEY PLAZA, BOX 970  
Property Owner Mailing City KEY WEST State FL Zip 33040  
Property Owner Phone Number (305) 525-4333  
Property Owner Signature [Signature]

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

I ROBERT RAPPAPORT, 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 [Signature]

The forgoing instrument was acknowledged before me on this 16<sup>th</sup> day April 2014

By (Print name of Affiant) ROBERT RAPPAPORT who is personally known to me or has produced FL Drivers License as identification and who did take an oath.

NOTARY PUBLIC  
Sign Name: [Signature]

Notary Public - State of Florida (seal)

Print Name: CHARLENE ALEXANDRA ROSARIO

My Commission Expires: 04/09/2016

