

STAFF REPORT

DATE: August 30, 2017

RE: **3821 Eagle Avenue (permit application # T17-8613)**

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

An application was received requesting the removal of **(1) Jamaican Dogwood tree**. A site inspection was done on August 25, 2017 and documented the following:

Tree Species: Jamaican Dogwood (*Piscidia piscipula*)





08/25/2017





08/25/2017









Diameter: 17.1"

Location: 70% (back yard tree, between structure and fence)

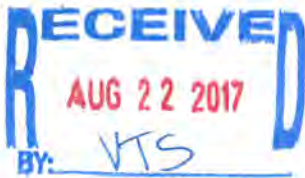
Species: 100% (on protected tree list)

Condition: 50% (fair to poor, poor canopy structure-branch tears in canopy)

Total Average Value = 73%

Value x Diameter = 12.4 replacement caliper inches

Application



Canopy-
Removal

8613

Tree Permit Application

Date: 8-22-2017

Please Clearly Print All Information unless indicated otherwise.

Tree Address 3821 Eagle Ave.
Cross/Corner Street _____
List Tree Name(s) and Quantity 1 Jamaica Dogwood
Species Type(s) check all that apply () Palm () Flowering () Fruit () Shade () Unsure

Reason(s) for Application:

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

Additional Information and Explanation Every time there's a big wind this tree has numerous limbs break off. We clean it up, it puts out a bunch of regrowth and then it happens again and again. The tree refuses to get a stable shape.

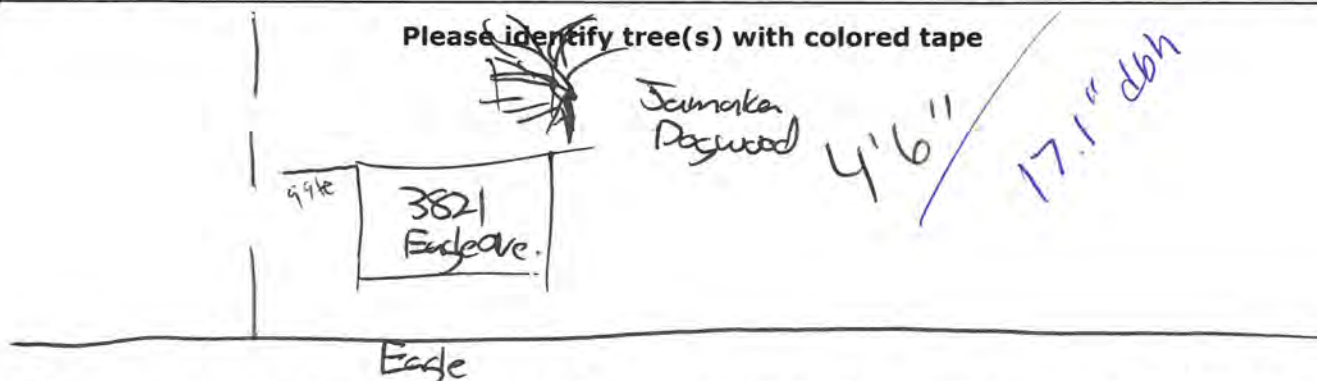
Property Owner Name Robert Mongelli
Property Owner eMail Address michelle@voostica.com
Property Owner Mailing Address 3821 Eagle Ave.
Property Owner Mailing City Key West State FL Zip 33090
Property Owner Phone Number (305) 923-6000
Property Owner Signature _____

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

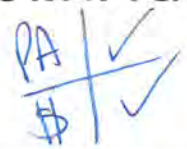
NOTE: A Tree Representation Authorization form must accompany this application if someone other than the owner will be representing the owner at a Tree Commission meeting or picking up an issued Tree Permit.

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.





Tree Representation Authorization

Date: _____

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 3821 Eagle Avenue

Property Owner Name Robert Mongelli

Property Owner eMail Address michelle@roostica.com

Property Owner Mailing Address 3821 Eagle Avenue

Property Owner Mailing City Key West **State** FL **Zip** 33040

Property Owner Phone Number (305) 923 - 6000

Property Owner Signature _____

Representative Name Kenneth King

Representative eMail Address _____

Representative Mailing Address 1602 Laid St.

Representative Mailing City Key West **State** FL **Zip** 33040

Representative Phone Number (305) 296 - 8101

I ROBERT C. MONGELLI, 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 is there is any questions or need access to my property.

Property Owner Signature _____

The forgoing instrument was acknowledged before me on this 28 day June 2017.

By (Print name of Affiant) Robert Mongelli who is personally known to me or has produced _____ as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: _____ Notary Public - State of Florida (seal)

Print Name: Mariiska Suri

My Commission Expires: Jan 22, 2019

