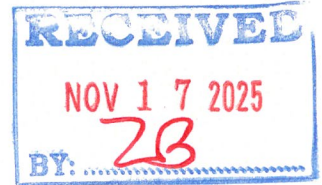




T2025-0261

970.00



## Tree Permit Application

Please Clearly Print All Information unless indicated otherwise. Date: 11/17/2025

**Tree Address** 1903-1905 Flagler Ave  
**Cross/Corner Street** 1st Street  
**List Tree Name(s) and Quantity** See attached

**Reason(s) for Application:**

- ( ) Remove ( ) Tree Health ( ) Safety ( ☒ ) Other/Explain below  
( ) Transplant ( ) New Location ( ) Same Property ( ) Other/Explain below  
( ) Heavy Maintenance Trim ( ) Branch Removal ( ) Crown Cleaning/Thinning ( ) Crown Reduction

**Additional Information and Explanation** Conceptual landscape plan approval and removal of 15 regulated palms and 9 regulated trees for the development of a tree and plant nursery.  
All replacement trees to be planted on site.

**Property Owner Name** Sugar Apple Properties LLC  
**Property Owner email Address** marston@keywestlaw.net  
**Property Owner Mailing Address** 1011 Truman Ave  
**Property Owner Phone Number** 305-296-7314  
**Property Owner Signature** Marie Locklin  
**\*Representative Name** Smith Hawks, PL  
**Representative email Address** aj@smithhawks.com  
**Representative Mailing Address** 138 Simonton Street  
**Representative Phone Number** 305-296-7227

\*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 fees are required. [Click here for the fee schedule.](#)

Sketch location of tree (aerial view) including cross/corner street. Please identify tree(s) on the property regarding this application with colored tape or ribbon.

See attached.



## 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 11/11/25  
Tree Address 1903-1905 Flagler Ave  
Property Owner Name Sugar Apple Properties LLC  
Property Owner Mailing Address 1011 Truman Ave  
Property Owner Mailing City, State, Zip Key West, FL 33040  
Property Owner Phone Number 305-296-7314  
Property Owner email Address marston@keywestlaw.net  
Property Owner Signature Marie Locklin  
Representative Name Smith Hawks, PL  
Representative Mailing Address 138 Simonton Street  
Representative Mailing City, State, Zip Key West, FL 33040  
Representative Phone Number 305-296-7227  
Representative email Address aj@smithhawks.com

I, Marie Locklin 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 Marie Locklin

The forgoing instrument was acknowledged before me on this 11<sup>th</sup> day November 2025  
By (Print name of Affiant) Marie Locklin who is personally known to me or has produced as identification and who did take an oath.

Notary Public

Sign name:

Print name:

My Commission expires:

Notary Public-State of

(Seal)



JOHN MARSTON  
Notary Public, State of Florida  
My Comm. Expires 08/24/2029  
Commission No. HH 713695