

# STAFF REPORT

DATE: September 22, 2016

RE: **417 Elizabeth Street #6 (permit application # T16-8133)**

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

An application was received requesting the removal of **(1) Jacaranda tree**.  
A site inspection was done and documented the following:

Tree Species: Jacaranda (Jacaranda sp.)







09/19/2016





09/19/2016





09/19/2016





Diameter: 18.1"

Location: 50% (large tree too close to building, root impacts)

Species: 50% (not on protected or not protected tree list)

Condition: 40% (poor condition, poor structure, heavy growth lean, poor canopy, decay in old cuts)

Total Average Value = 46%

**Value x Diameter = 8.3 replacement caliper inches**

**Recommendation: Recommend approval of the removal of one (1) Jacaranda tree at 417 Elizabeth Street #6 to be replaced with 8.3 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted on site.**

# Application

RECEIVED  
SEP 15 2016  
VSN



8133

Tree Permit Application

Date: 9/15/16

Please Clearly Print All Information unless indicated otherwise.

Tree Address 417 Elizabeth St #6  
Cross/Corner Street Between Eaton & Flemming  
List Tree Name(s) and Quantity 1 Sacaranda  
Species Type(s) check all that apply ( ) Palm (X) Flowering ( ) Fruit ( ) Shade ( ) Unsure  
Reason(s) for Application:

- (X) REMOVE (X) Tree Health (X) 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 Tree is over-mature, too close to building. Disabled tenant, Mr. Dubuc, fears for his safety from falling branches

Property Owner Name Charles Clark  
Property Owner eMail Address mouse9.cc@gmail.com  
Property Owner Mailing Address 417 Elizabeth St #3, KW  
Property Owner Mailing City KW State FL Zip 33040  
Property Owner Phone Number (305) 923-6899  
Property Owner Signature Charles Clark

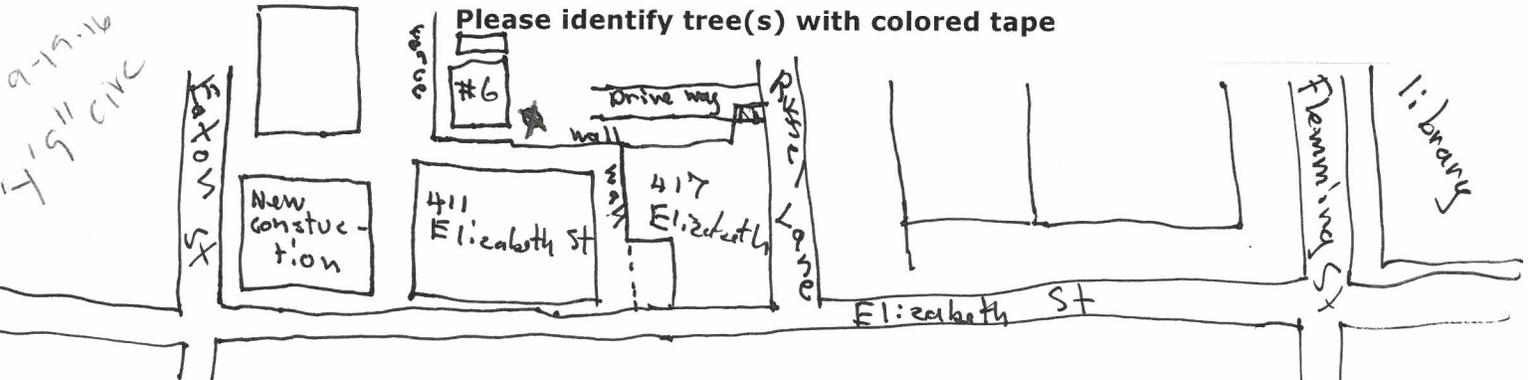
Representative Name LARLIE BUSLOFF L. LIZARD TS  
Representative eMail Address " " @ yahoo.com  
Representative Mailing Address 410 AVE C  
Representative Mailing City KW State FL Zip 33040  
Representative Phone Number (305) 304-1581

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 ( )

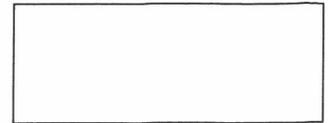
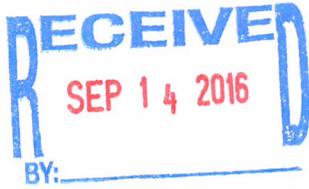
<<<<< Sketch location of tree in this area including cross/corner Street >>>>>

Please identify tree(s) with colored tape



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

VSN ✓ PA



Tree Representation Authorization

Date: 9/2/16

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 417 Elizabeth St, KW, Apt #6
Property Owner Name Charles Clark, (Ann Melsay)
Property Owner eMail Address 417 Elizabeth St, Apt #3
Property Owner Mailing Address same
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (305) 923-6899
Property Owner Signature Charles K. Clark

Representative Name LARRIE BUSLOPE L. LIZARD TREE
Representative eMail Address '' @ YAHOO.COM
Representative Mailing Address 410 AVE C
Representative Mailing City State Zip 33040
Representative Phone Number (305) 304-1581

I Charles Clark, (Charles Clark), 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 Charles Clark

The forgoing instrument was acknowledged before me on this 2 day September 2016

By (Print name of Affiant) Charles Clark who is personally known to me or has produced FLDL as identification and who did so at

NOTARY PUBLIC
Sign Name: Katherine Diaz
Print Name: Katherine Diaz
My Commission Expires: May 4, 2020

Notary Public - State of Florida (seal)





**Scott P. Russell, CFA**  
**Property Appraiser**  
**Monroe County, Florida**

Key West (305) 292-3420  
Marathon (305) 289-2550  
Plantation Key (305) 852-7130

## Property Record Card -

**Maps are now launching the new map application version.**

Website tested on IE8,  
IE9, & Firefox.  
Requires Adobe Flash  
10.3 or higher

**Alternate Key: 1006360 Parcel ID: 00006140-000000**

### Ownership Details

**Mailing Address:**  
CLARK CHARLES R  
417 ELIZABETH ST APT 3  
KEY WEST, FL 33040-6886

**All Owners:**  
CLARK C ANN L/E T/C, CLARK CHARLES R

### Property Details

**PC Code:** 08 - MULTI FAMILY LESS THAN 10UNITS  
**Millage Group:** 10KW  
**Affordable Housing:** No  
**Section-Township-Range:** 06-68-25  
**Property Location:** 417 ELIZABETH ST KEY WEST  
**Legal Description:** KW PT LOTS 3 AND 4 SQR 35 H1-508 COUNTY JUDGES DOCKET 2-74-28 AND 2-74-170 OR606-594 OR 619-664OR628-22 OR678-551/54 OR 716-807/08 OR748-349/51 OR754-1364/65 OR836-1215 OR1064-1277/78L/E OR1596-727/30 OR1599-1387D/C OR1637-1913/15L/E