



T2026 - 0038



TC

Tree Permit Application

Please Clearly Print All Information unless indicated otherwise. Date: 2/13/26

Tree Address 1024 James st. ROW parking
Cross/Corner Street _____
List Tree Name(s) and Quantity Hura crepitans (Sandbox Tree)

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 21" Tree is 99% dead

Property Owner Name City of Key West
Property Owner email Address _____
Property Owner Mailing Address _____
Property Owner Phone Number _____
Property Owner Signature _____

*Representative Name Urban Forestry Brett Mayle/Zach Bentley
Representative email Address _____
Representative Mailing Address _____
Representative Phone Number 305 509 3957

*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.

