



AGENDA ITEM #

City of Key West Tree Commission

Tree Permit Application # 0102

PO Box 1409
Key West, FL 33040
Phone: 305-809-3764
Fax: 305-809-3978

Home/Property Owner: Leonard + Elizabeth Homer Date: 7/18/12

Mailing Address: 116 Warren Ave., Baltimore MD 21230

Owner Signature: Elizabeth L. Homer Owner Ph#: 443 838-3352

Represented by: Rep. Ph#:

Represented by mailing address:

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. A letter of representation from the owner must accompany this application if the owner is unable to attend.

Letter of Representation ( )

Tree(s) Address: 811 United St. Cross/Corner Street: United + Margaret

Common Name(s): Tropical Almond Scientific Name(s):

Species Type(s) {check all that apply}: ( ) Palm ( ) Flowering ( ) Fruit ( ) Shade

Reason(s) for Application {check all that apply}:
( ) REMOVE ( ) TRANSPLANT ( ) HEAVY MAINTENANCE
( ) Tree Health ( ) New Location ( ) Branch Removal
( ) Safety ( ) Same Property ( ) Crown Cleaning/Thinning
( ) Other / Explain ( ) Other / Explain ( ) Crown Reduction



Reason(s) for request: tree is severely distressed and proposes a hazard to people and property

Replacement plant material must be Florida Grade #1. Replacement of a palm with a native palm is required. Replacement of a canopy tree with a native canopy tree is required. If you need assistance with replacements, please call the Landscape Department at 305-809-3764.

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

Provide access for viewing tree(s) prior to meeting  
Identify tree(s) with colored tape

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Tree Species \_\_\_\_\_

Circumference \_\_\_\_\_ ÷ 3.14 = diameter \_\_\_\_\_

Location \_\_\_\_\_ % Species \_\_\_\_\_ % Condition \_\_\_\_\_ % Total Average Value \_\_\_\_\_ %

Avg. value \_\_\_\_\_ X \_\_\_\_\_ Diameter = \_\_\_\_\_

Replacement Inches

LOCATION: OLD CITY HALL, 510 GREENE STREET, 5:00 p.m.

FOR TREE COMMISSION USE ONLY.

( ) TABLED ( ) APPROVED ( ) DENIED ( ) FURTHER ACTION

COMMENTS:

\_\_\_\_\_

\_\_\_\_\_

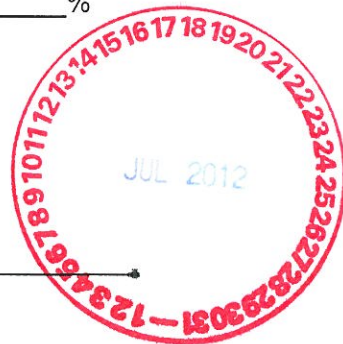
CHAIRPERSONS SIGNATURE/DATE

City Engineer comments if required:

\_\_\_\_\_

\_\_\_\_\_

ENGINEER'S SIGNATURE/DATE



**AUTHORIZATION LETTER**

116 Warren Ave  
(owner address)  
Baltimore MD  
21230

Dear Tree Commissioners:

This letter is authorization and confirmation that I, Secluded Gardens Condo Association  
by Elizabeth L. Homer, have  
(owner name)  
retained Dan's Tropical Tree Service to represent me in the matter of obtaining a  
(representative name)  
permit from the City of Key West for my property at 811 United St., Key West  
(tree address)  
You may contact me at 443-838-3352. Thank you.  
(telephone number)

Elizabeth L. Homer  
Signature

City of Key West Tree Commission  
McCoy Indigenous Park  
1801 White Street  
Key West, FL 33040