

AGENDA ITEM #



6147

City of Key West Tree Commission

Tree Permit Application

PO Box 1409
Key West, FL 33040
Phone: 305-809-3764
Fax: 305-296-6152

9/27/12
OK
10-1-12

Home/Property Owner: LINDA MARSHALL Date: 9.12.2012

Mailing Address: 1407 ROSE ST, KEY WEST, FL 33040

Owner Signature: Linda Marshall Owner Ph#: 305 294.4811

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: 1407 ROSE ST Cross/Corner Street: ROSE/STEVEN

Common Name(s): FIDDLEWOOD Scientific Name(s): CITHAREXYLUM FRUTICOSUM

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:

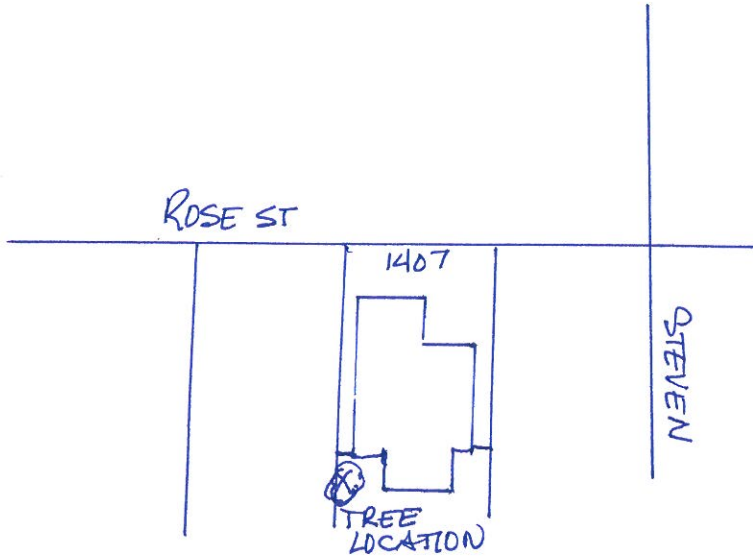
TREE HAS GANODERMA, AN UNTREATABLE FUNGUS.
CONKS HAVE FORMED ON THE TRUNK AND ROOTS.

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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Do not write under this line

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