

STAFF REPORT

DATE: September 23, 2016

RE: **2727 Harris Avenue (permit application # T16-8115)**

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

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

Tree Species: Pink Tabebuia (*Tabebuia heterophylla*)











Diameter: $33'' - 24'' = 9''$

Location: 60% (front yard tree-very visible, some root impacts)

Species: 0% (on not protected tree list)

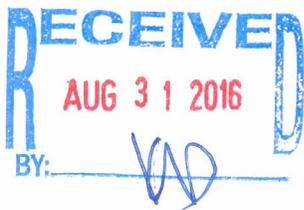
Condition: 80% (good health, tree has been maintained, very tall and "leggy" with strong canopy and large root system to support tree)

Total Average Value = 46%

Value x Diameter = 4.1 replacement caliper inches

Root impact concerns are valid.

Application



8115

Tree Permit Application

Date: 8/30/16

Please Clearly Print All Information unless indicated otherwise.

Tree Address 2727 HARRIS AVE, KEY WEST FL 33040
 Cross/Corner Street 10TH ST / SUNSET DR
 List Tree Name(s) and Quantity TABEBUIA ONE
 Species Type(s) check all that apply () Palm () Flowering () Fruit () Shade () Unsure

Reason(s) for Application:

- () REMOVE () Tree Health () Safety () Other/Explain below
- () TRANSPLANT () New Location () Same Property () Other/Explain below
- () HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction

Other/Explain TREE ROOTS DAMAGING PLUMBING LINES
LIFTING SIDEWALK, ENCRANCHING TOWARD STRUCTURE

Reason for Request

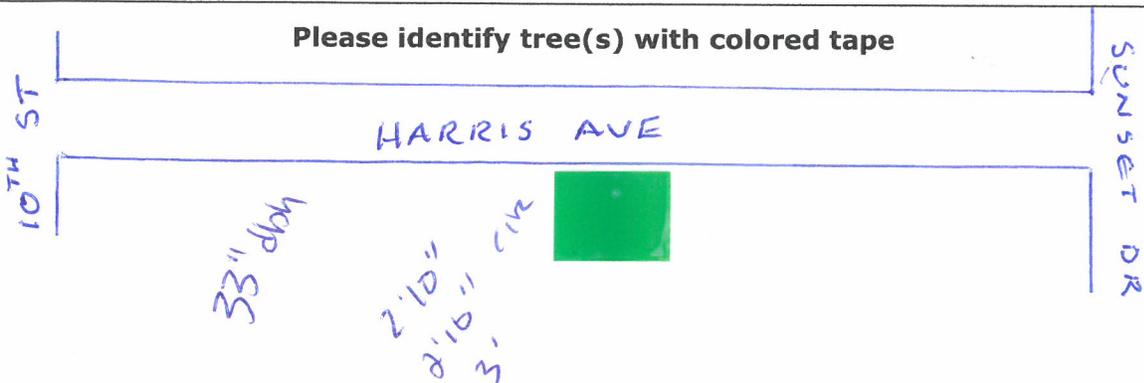
Property Owner Name WALTER SEMIKEN - ALISTAIR CLOSS
 Property Owner eMail Address EXCELHSD@GMAILSOUTH.NET
 Property Owner Mailing Address 2727 HARRIS AVE
 Property Owner Mailing City KEY WEST State FL Zip 33040
 Property Owner Phone Number (305) 360-7323
 Property Owner Signature [Signature]

Representative Name _____
 Representative eMail Address _____
 Representative Mailing Address _____
 Representative Mailing City _____ State _____ Zip _____
 Representative Phone Number (_____) _____ - _____

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 >>>>>



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