

City of Key West Tree Commission

Tree Permit Application

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

Home/Property Owner: Deborah J Romano Date: 3/26/12

Mailing Address: 208 FRONT ST. KW FL. 33040

Owner Signature: Deborah J Romano Owner Ph#: (978)-229-5091

Represented by: Self 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: 1012 SOUTHARD ST. KW Cross/Corner Street: SOUTHARD/GEMMELL

Common Name(s): SPANISH LIME-MACE Scientific Name(s): \_\_\_\_\_

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

Reason(s) for Application {check all that apply):

- |                                            |                                          |                                                  |
|--------------------------------------------|------------------------------------------|--------------------------------------------------|
| <input checked="" type="checkbox"/> REMOVE | <input type="checkbox"/> TRANSPLANT      | <input type="checkbox"/> HEAVY MAINTENANCE       |
| <input type="checkbox"/> Tree Health       | <input type="checkbox"/> New Location    | <input type="checkbox"/> Branch Removal          |
| <input type="checkbox"/> Safety            | <input type="checkbox"/> Same Property   | <input type="checkbox"/> Crown Cleaning/Thinning |
| <input type="checkbox"/> Other / Explain   | <input type="checkbox"/> Other / Explain | <input type="checkbox"/> Crown Reduction         |

Reason(s) for request:

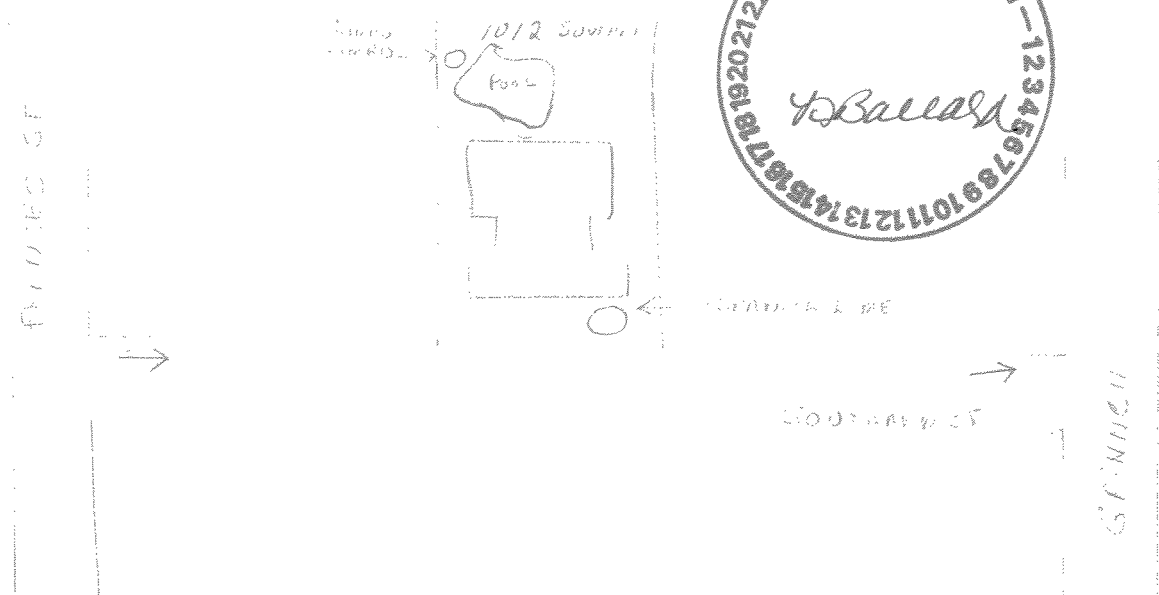
TREE LIFTING FOUNDATION - RENOVATION OF  
House AFTER PURCHASE  
FRONT YARD.

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

AGENDA ITEM #  
\_\_\_\_\_



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: \_\_\_\_\_

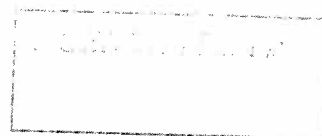
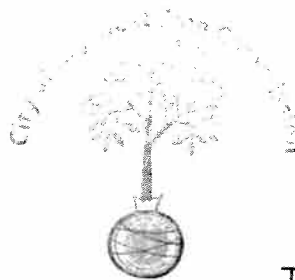
\_\_\_\_\_

CHAIRPERSONS SIGNATURE/DATE

City Engineer comments if required: \_\_\_\_\_

\_\_\_\_\_

ENGINEER'S SIGNATURE/DATE



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\_\_\_\_\_ Letter of Representation ( )

Tree(s) Address: 1012 SOUTHARD Cross/Corner Street: SOUTHARD/GRINWELL

Common Name(s): Gumbo Limbo Scientific Name(s): BURSERIA SIMARUBA

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

Reason(s) for Application {check all that apply}:

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

Reason(s) for request:

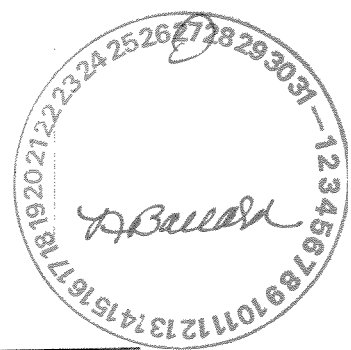
Roots growing into pool - lifting decking  
BACKYARD

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AGENDA ITEM #



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

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

Avg. value \_\_\_\_\_ X \_\_\_\_\_ Diameter = \_\_\_\_\_  
**Replacement Inches**

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COMMENTS: \_\_\_\_\_  
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CHAIRPERSONS SIGNATURE/DATE

City Engineer comments if required: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ENGINEER'S SIGNATURE/DATE