

FRID 7 2012  
Baccala



AGENDA ITEM #

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: Heidi Gold Date: 2-19-2012

Mailing Address: 630 Day St, Key West, FL 33040

Owner Signature: \_\_\_\_\_ Owner Ph#: (305) 292-9730

Represented by: Kenneth King Rep. Ph#: (305) 296-8101

Represented by mailing address: 1602 Leeward St, Key West, FL 33040

**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: 630 Day St, Cross/Corner Street: Elizabeth St,

Common Name(s): Mahogany Scientific Name(s): \_\_\_\_\_

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

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

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

Reason(s) for request:

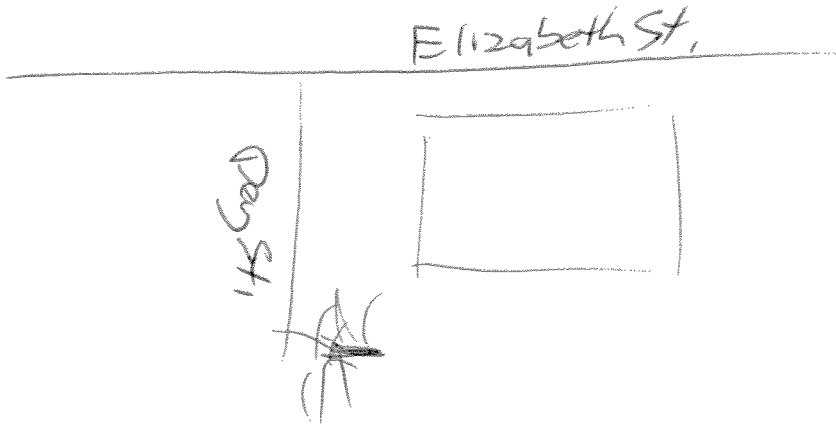
Tree is destroying sidewalk and other stuff. The tree commission approved this tree for removal on 2/13/2008 we never got around to it and now the permit is too old.

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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FEB 21 2012

*Ballard*

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**