



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: Mark O. Friga Date: 1-22-2012

Mailing Address: 1124 Olivia St. Key West, FL 33040

Owner Signature: _____ Owner Ph#: (305) 249-0645

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

Represented by mailing address: 1602 Ladd 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: 1124 Olivia St. Cross/Corner Street: White St.

Common Name(s): Gumbo Limbo 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 checked="" type="checkbox"/> Other / Explain	<input type="checkbox"/> Other / Explain	<input type="checkbox"/> Crown Reduction

Reason(s) for request:

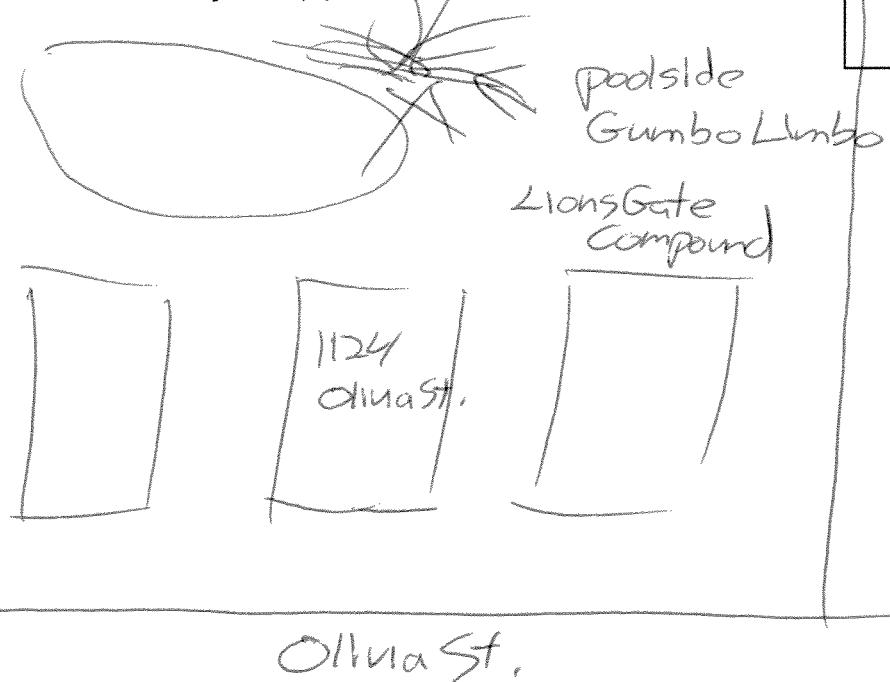
The pool has already required major repairs to the trunk due to tree roots pushing into the pool's plumbing and concrete structure.

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 _____ $\div 3.14 =$ 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

1124 OLIVIA ST
(owner address)

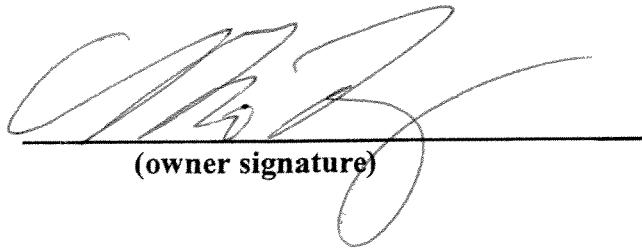
LIONSGATE CONDOMINIUM

KEY WEST, FL

Dear Tree Commissioners:

This letter is authorization and confirmation that I, MARK O. FRIGA, Pres.,
(owner name)
have retained Kenneth King to represent me in the matter
(representative name)
obtaining a permit from the City of Key West for my property at 1124 OLIVIA
(address)
ST. You may contact me at 585-749-0645. Thank you.
(telephone number)

sincerely,


(owner signature)

City of Key West Tree Commission
Public Works Facility
633 Palm Avenue
Key West, FL 33040
Office: (305)-809-3764
Fax: (305)-296-6152



From the desk of:

Mark O. Friga, CFP, EA
mofriga@rochester.rr.com
mfriga@frigafinancial.com

For Access to Lionsgate
please contact

Scott McNally
1124 Olivia St (down)
Key West, FL

973-728-1776

973-332-2086

tht y

MOZ

1530 Dewey Avenue • Rochester, New York 14615 • (585) 254-7252 • Fax (585) 254-8903
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