

STAFF REPORT

DATE: March 30, 2022

RE: **1210 Von Phister Street (permit application # T2022-0101)**

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

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

Tree Species: Mahogany (Swietenia mahagoni)



Photo showing location of tree.



Photo of whole tree.



Photo of tree canopy, view 1a.



Photo of tree trunk, view 1.



Photo of
tree
canopy,
view 1b.



Closeup
photo of
base of tree.



Photo of
tree
canopy 2a.



Photo of
tree
canopy
view 2b.



Photo of tree
canopy and trunk,
view 2.

Diameter: 13.6"

Location: 60% (growing in front of property close to property line in between two driveways. Canopy impacted by utility lines.)

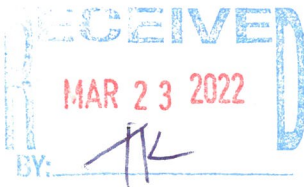
Species: 100% (on protected tree list)

Condition: 50% (overall condition is fair, poor structure)

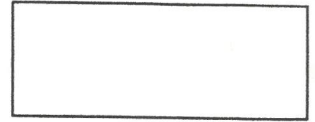
Total Average Value = 70%

Value x Diameter = 9.5 replacement caliper inches

Application



T2022-0101



Tree Permit Application

Date: 3/22/22

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1210 VanPhister
Cross/Corner Street White
List Tree Name(s) and Quantity (1) Mahogany
Species Type(s) check all that apply () Palm () Flowering () Fruit (X) Shade () Unsure
Reason(s) for Application:

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

Other/Explain Tree in bad location - under powerlines, off balance, between 2 drive ways

Reason for Request

Property Owner Name Char Reanick
Property Owner eMail Address churrear1@gmail.com
Property Owner Mailing Address 1210 Van Phister
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (305) 291-1652
Property Owner Signature

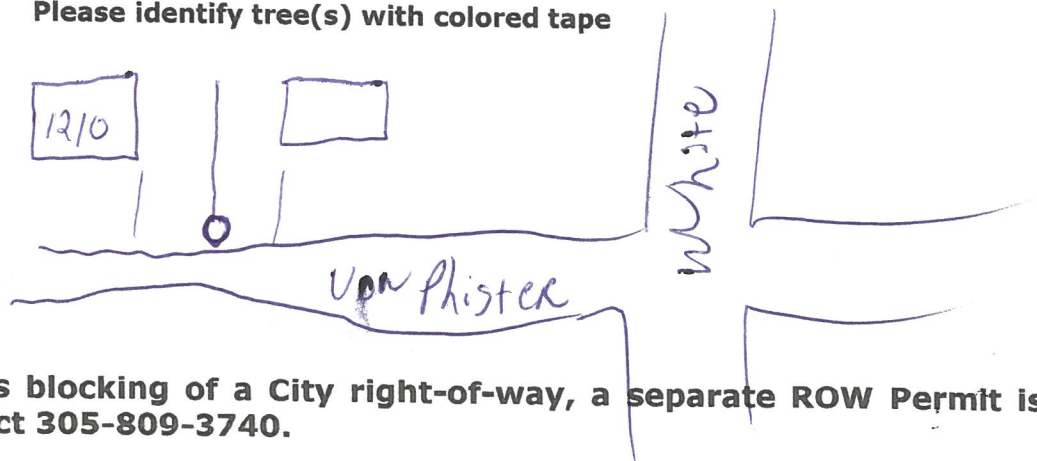
Representative Name Treeman, LLC Sean Creedon
Representative eMail Address Keystreeman@gmail.com
Representative Mailing Address P.O. Box 430204
Representative Mailing City Big Pine Key State FL Zip 33043
Representative Phone Number (305) 900-8448

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 >>>>>

Please identify tree(s) with colored tape



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



Tree Representation Authorization

Date: 2-22-22

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. This Tree Representation Authorization form must accompany the application if the property owner is unable to attend or will have someone else pick up the Tree Permit once issued.

Please Clearly Print All Information unless indicated otherwise.

Tree Address

1210 Von Phister

Property Owner Name

Char Rearick

Property Owner eMail Address

charrear1@gmail.com

Property Owner Mailing Address

1210 Von Phister

Property Owner Mailing City

Key West

State Fla

Zip

33040

Property Owner Phone Number

305-291-1652

Property Owner Signature

Char Rearick

33040

Representative Name

Treeman, LLC Sean Creedon

Representative eMail Address

keystreeman@gmail.com

Representative Mailing Address

P.O. Box 430204

Representative Mailing City

Big Pine Key

State FL

Zip 33043

Representative Phone Number

(305) 900-8448

I Char Rearick, hereby authorize the above listed agent(s) to represent me in the matter of obtaining a Tree Permit from the City of Key West for my property at the tree address above listed. You may contact me at the telephone listed above is there is any questions or need access to my property.

Property Owner Signature

Char Rearick

The forgoing instrument was acknowledged before me on this 22nd day February.

By (Print name of Affiant) Charlotte A. Rearick who is personally known to me or has produced Fla Drivers License as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Becky D. Hernandez Bauer

Notary Public - State of Florida (seal)

Print Name: Becky D. Hernandez Bauer

My Commission Expires: 10/18/2024

