T25-0125

Tree Permit Application

Please Clearly Print All Information unless indicated otherwise. Date: 5-26-2025

Tree Address 1024 16th Terrace
Cross/Corner Street Northside Drive.
List Tree Name(s) and Quantity 1 Gumbo Limbo tree
Reason(s) for Application:
(X) Remove ( ) Tree Health (X) Safety (X) Other/Explain below
( ) Transplant ( ) New Location ( ) Same Property ( ) Other/Explain below
( ) Heavy Maintenance Trim ( ) Branch Removal ( ) Crown Cleaning/Thinning ( ) Crown Reduction
Additional Information and Explanation The owner has done all he can do to keep the tree including paying for several major trims. However the roots are causing irreparable damage to the foundation and walls of the structure.

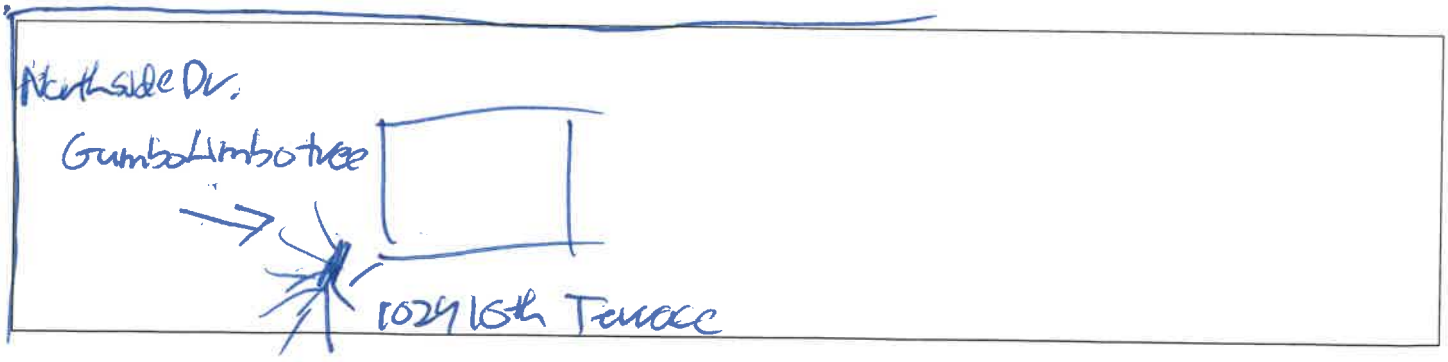
Property Owner Name George W. Koehn
Property Owner email Address pedidik@Bellsouth.Net
Property Owner Mailing Address 1024 16th Terrace
Property Owner Phone Number 305-304-5996
Property Owner Signature

***Representative Name** Kenneth King
Representative email Address
Representative Mailing Address 1602 Laird St.
Representative Phone Number 305-296-8101

*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.

As of August 1, 2022, application fees are required. Click here for the fee schedule.

Sketch location of tree (aerial view) including cross/corner street. Please identify tree(s) on the property regarding this application with colored tape or ribbon.



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Additional Information and Explanation _____

Property Owner Name George W. Kochn
Property Owner email Address _____
Property Owner Mailing Address _____
Property Owner Phone Number _____
Property Owner Signature _____

***Representative Name** _____
Representative email Address _____
Representative Mailing Address _____
Representative Phone Number _____

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Tree Representation Authorization

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.

Date 05-13-2025
Tree Address 1024 16th Terrace
Property Owner Name George W. Koehn
Property Owner Mailing Address 1024 16th Terrace
Property Owner Mailing City, State, Zip Key West, Fl
Property Owner Phone Number 305-304-5996
Property Owner email Address Pedidik@BellSouth.Net
Property Owner Signature George W. Koehn

Representative Name Kenneth King
Representative Mailing Address 1602 Laird St.
Representative Mailing City, State, Zip Key West FL 33040
Representative Phone Number 305-296-8101
Representative email Address

I George Koehn 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 if there are any questions or need access to my property.

Property Owner Signature George W. Koehn

The forgoing instrument was acknowledged before me on this 19th day May.
By (Print name of Affiant) _____ who is personally known to me or has produced _____ as identification and who did take an oath.

Notary Public
Sign name:
Print name: Dana N. Vega

My Commission expires: 07/02/2028 **Notary Public-State of** Florida **(Seal)**

DANA N. VEGA
Notary Public - State of Florida
Commission # HH 501252
My Comm. Expires Jul 2, 2028
Bonded through National Notary Assn.