T25-0120

Tree Permit Application

Please Clearly Print All Information unless indicated otherwise. Date: 04/30/2025

Tree Address 1010 Kennedy Dr

Cross/Corner Street

List Tree Name(s) and Quantity 1 Black Olive Tree

Reason(s) for Application:

☑ Remove ( ) Tree Health ( ) Safety ☑ 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 generator for the building has to be placed in this area as there is no other location available.

Property Owner Name Kennedy Center Condominium Association, Inc.

Property Owner email Address victond@p-and-co.com

Property Owner Mailing Address 1010 Kennedy Drive, Suite 201 Key West, FL 33040

Property Owner Phone Number 305-735-2627

Property Owner Signature

***Representative Name** Clifton Turner Shorty's Tree & Lawn Care LLC

Representative email Address shortystlc@gmail.com

Representative Mailing Address 19463 Date Palm Dr

Representative Phone Number 3056479261

*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.

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 5/12/2025

Tree Address 1010 Kennedy Dr. Key West, FL 33040

Property Owner Name Kennedy Center Condominium Association, Inc.

Property Owner Mailing Address 1010 Kennedy Dr. Suite 201

Property Owner Mailing City,
State, Zip Key West Florida, 33040

Property Owner Phone Number 305-735-2627

Property Owner email Address victoria@p-and-co.com

Property Owner Signature

Representative Name Clifton Turner Shortys Tree & Lawn Care LLC

Representative Mailing Address 19463 date palm dr

Representative Mailing City,
State, Zip sugarloaf key fl 33042

Representative Phone Number 3056479261

Representative email Address shortystlc@gmail.com

I Kevin Pribramsky, Treasurer 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

The forgoing instrument was acknowledged before me on this 12th day MAY 2025.

By (Print name of Affiant) Kevin Pribramsky who is ~~personally known~~ to me or has produced as identification and who did take an oath.

Notary Public

Sign name:

Print name: Victoria Ashmore

My Commission expires: 8/11/2028 **Notary Public-State of** Florida **(Seal)**

Notary Public State of Florida
Victoria Ashmore
My Commission HH 517251
Expires 8/11/2028