

STAFF REPORT

DATE: January 29, 2018

RE: **1404 Petronia Street (permit application # T18-8824)**

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

An application was received requesting the removal of **(1) Gumbo Limbo tree**. A site inspection was done on January 23, 2018 and documented the following:

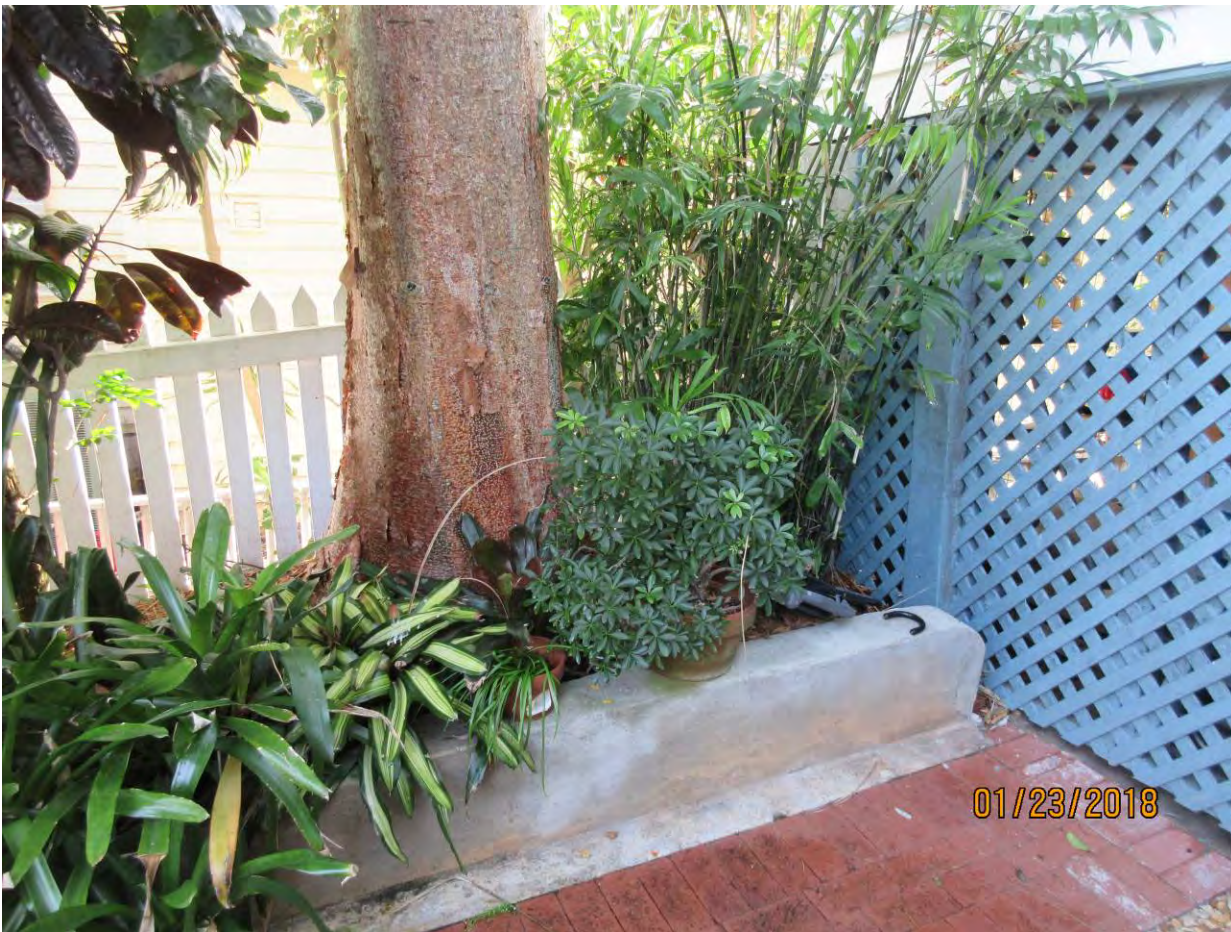
Tree Species: Gumbo Limbo (*Bursera simaruba*)

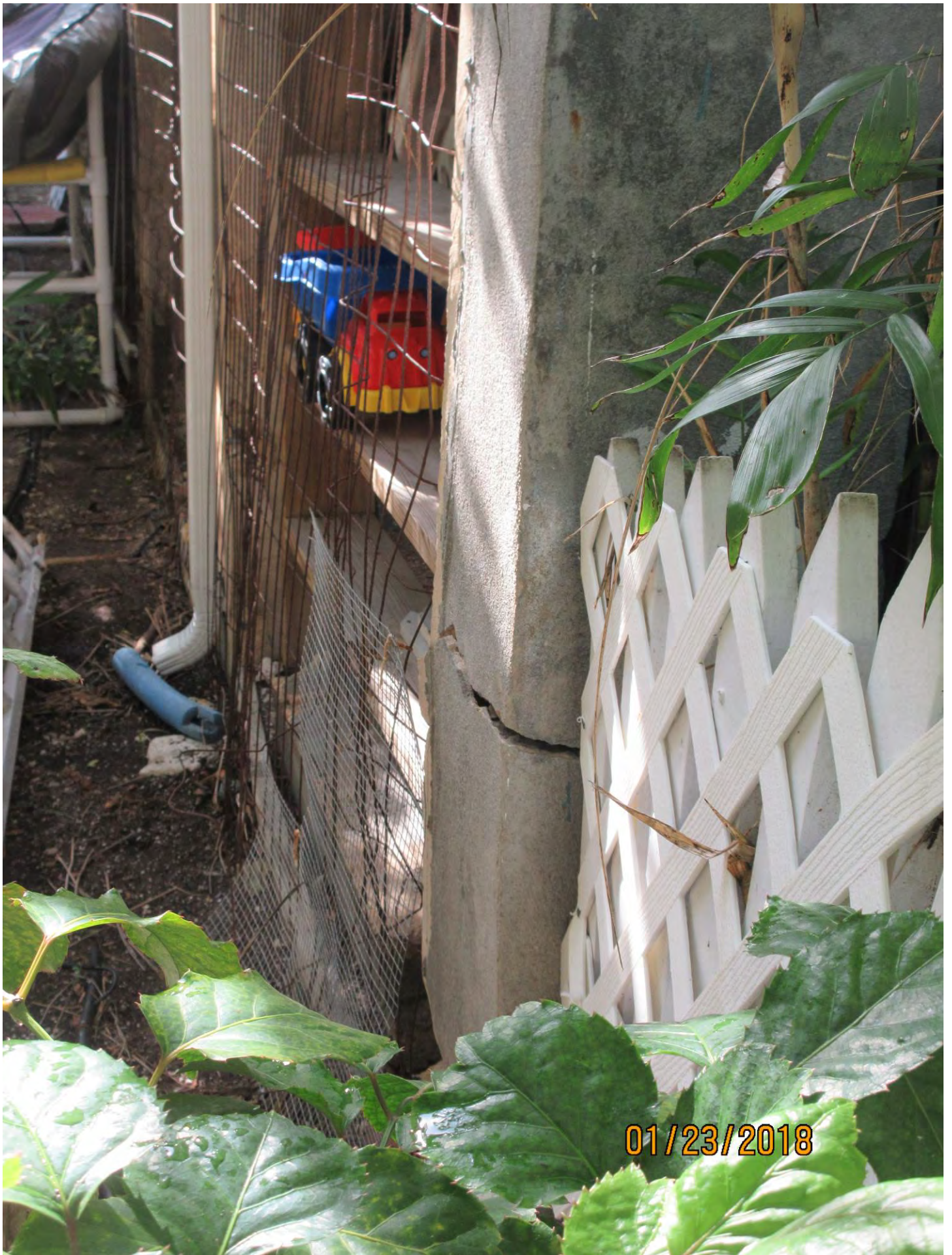




01/23/2018







Diameter: 17.8"

Location: 40% (growing in a raised type planter, roots impacting support pillar of house)

Species: 100% (on protected tree list)

Condition: 80% (good)

Total Average Value = 73%

Value x Diameter = 12.9 replacement caliper inches

A request has been made for additional information regarding damage to support pillar.

Application



CANOPY
REMOVAL

8824

Tree Permit Application

Date: 1-22-2018

Please Clearly Print All Information unless indicated otherwise.

Tree Address 1404 Petrona St
Cross/Corner Street Florida St
List Tree Name(s) and Quantity 1 Gumbo Limbo
Species Type(s) check all that apply () Palm () Flowering () Fruit (X) Shade () Unsure
Reason(s) for Application:
(X) REMOVE () Tree Health () Safety (X) Other/Explain below
() TRANSPLANT () New Location () Same Property () Other/Explain below
() HEAVY MAINTENANCE () Branch Removal () Crown Cleaning/Thinning () Crown Reduction
Additional Information and Explanation The trees roots have pushed the support pillar away from the house. The roots have been cut back before but because the trunk is so close the damage continues.
Property Owner Name John Calleja
Property Owner eMail Address _____
Property Owner Mailing Address 1404 Petrona St
Property Owner Mailing City Key West **State** FL **Zip** 33040
Property Owner Phone Number (305) 923-7236
Property Owner Signature _____

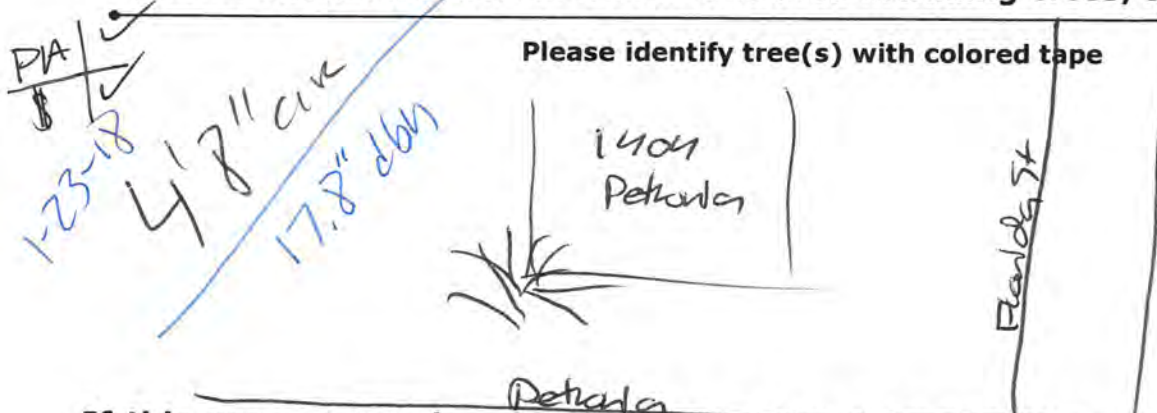
Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Cabal
Representative Mailing City Key West **State** FL **Zip** 33040
Representative Phone Number (305) 296-8101

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.

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: Jan 16, 2018

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 1404 PETRONIA ST
Property Owner Name JOHN CALLEJA
Property Owner eMail Address JFCKWF@gmail.com
Property Owner Mailing Address 1404 Petronia St - KW FL
Property Owner Mailing City KEY WEST State FL Zip 33040
Property Owner Phone Number (305) 923-7236
Property Owner Signature [Signature]
Representative Name Kenneth King
Representative eMail Address _____
Representative Mailing Address 1602 Land St.
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 296-8101

I JOHN CALLEJA, 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 [Signature]

The forgoing instrument was acknowledged before me on this 16 day January, 2018

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

NOTARY PUBLIC

Sign Name: [Signature]

Print Name: DIANEYS C RODRIGUEZ

My Commission Expires: May 16, 2021

Notary Public - State of Florida (seal)

