

# STAFF REPORT

DATE: April 25, 2018

RE: **1430 Johnson Street (permit application # T18-8957)**

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

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

Tree Species: Podocarpus (Podocarpus sp.)























04/13/2018













04/13/2018







Diameter: 9.8"

Location: 50% (base of tree close to house, growing under canopy of large mahogany tree)

Species: 50% (not on protected or not protected tree list)

Condition: 50% (fair to poor, codominant trunks)

Total Average Value = 50%

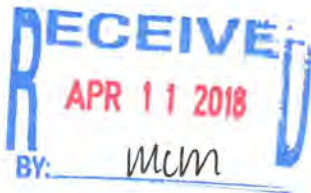
**Value x Diameter = 4.7 replacement caliper inches**

**Recommendation: Recommend approval of the removal of one (1) Podocarpus tree at 1430 Johnson Street to be replaced with 4.7 caliper inches of dicot or fruit trees from approved list, FL#1, to be planted on site.**



# Application





CANOPY  
TRIM

8957

Canopy  
remove 8964

## Tree Permit Application

Date: \_\_\_\_\_

All Information unless indicated otherwise.

Tree Address 1430 Johnson  
Cross/Corner Street Johnson & Leon  
List Tree Name(s) and Quantity Trim MAHOGANY - TAKE DOWN PODACARPAS  
Species Type(s) check all that apply ☐ Palm ☐ Flowering ☐ Fruit ☒ Shade ☐ Unsure  
Reason(s) for Application:

- ☐ REMOVE ☐ Tree Health ☐ Safety ☐ Other/Explain below  
☐ TRANSPLANT ☐ New Location ☐ Same Property ☐ Other/Explain below  
☒ HEAVY MAINTENANCE ☒ Branch Removal ☒ Crown Cleaning/Thinning ☒ Crown Reduction

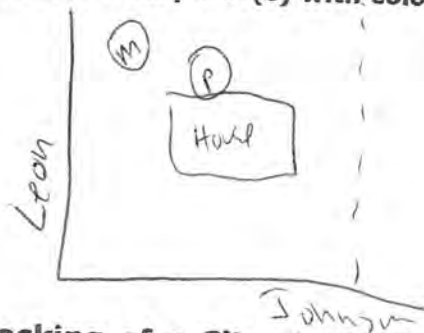
Additional  
Information  
and Explanation

Property Owner Name Elizabeth Merry & Christopher Schmit  
Property Owner eMail Address bethmerry@gmail.com  
Property Owner Mailing Address 1430 Johnson  
Property Owner Mailing City Key West State FL Zip 33040  
Property Owner Phone Number (414) 467-2722  
Property Owner Signature \_\_\_\_\_

Representative Name Treeman, LLC - Sean Creedon  
Representative eMail Address keystreeman@gmail.com  
Representative Mailing Address P.O. Box 430209  
Representative Mailing City Big Pine Key State FL Zip 33043  
Representative Phone Number (305) 908-8448  
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: 4-11-18

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 Read Carefully~~ All Information unless indicated otherwise.

Tree Address 1430 Johnson, Key West 33040

Property Owner Name Elizabeth Merry

Property Owner eMail Address bethmerry@gmail.com

Property Owner Mailing Address Key West State FL Zip 33040

Property Owner Mailing City Key West State FL Zip 33040

Property Owner Phone Number (414) 467-2722

Property Owner Signature [Signature]

Representative Name Treeman, LLC - Sean Creedon

Representative eMail Address Keytreeman@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 Elizabeth Merry, 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 is any questions or need access to my property.

Property Owner Signature [Signature]

The forgoing instrument was acknowledged before me on this 11 day April.

By (Print name of Affiant) Elizabeth Merry who is personally known to me or has produced FL-DL as identification and who did take an oath.

### NOTARY PUBLIC

Sign Name: [Signature]

Notary Public - State of Florida (seal)

Print Name: Megan Miller

My Commission Expires: Jan 16, 2022

