STAFF REPORT

DATE: May 2, 2019

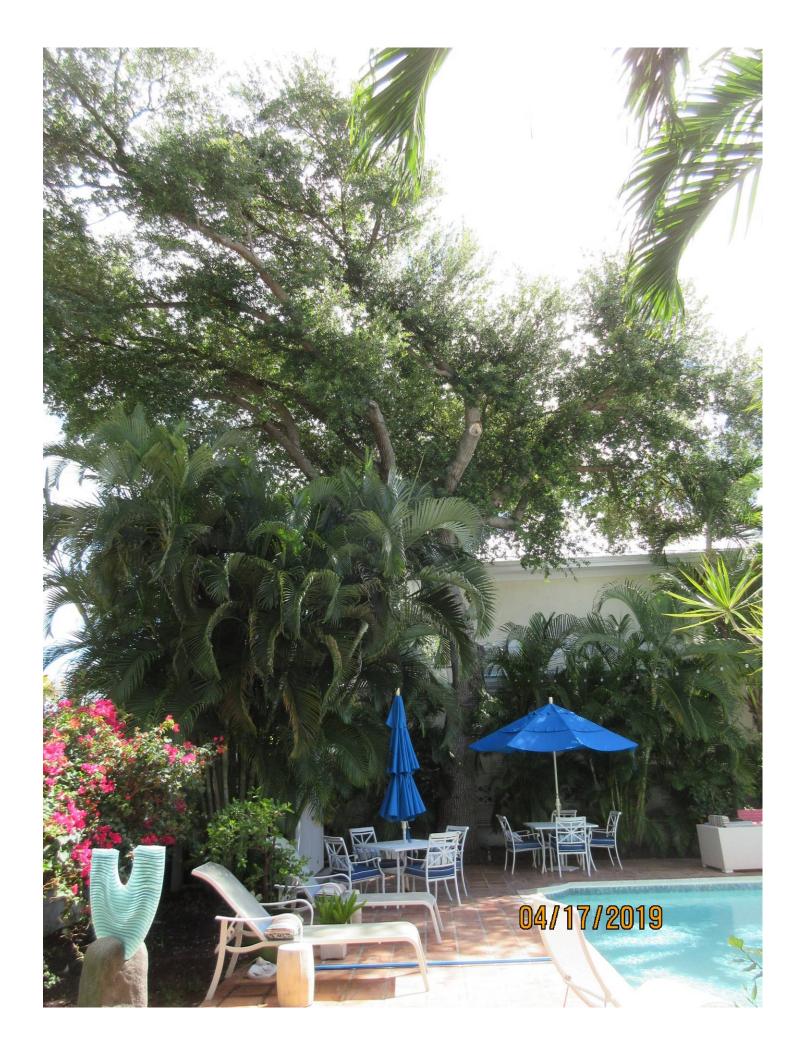
RE: 906 Johnson Street (permit application # T2019-0187)

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

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

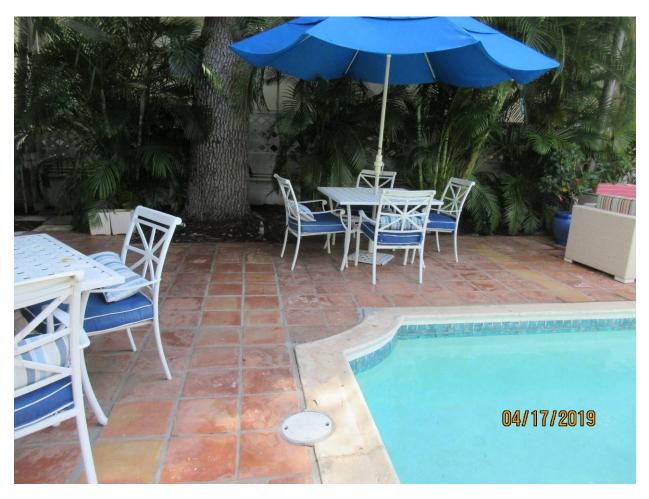
Tree Species: Black Olive (Bucidia beceras)



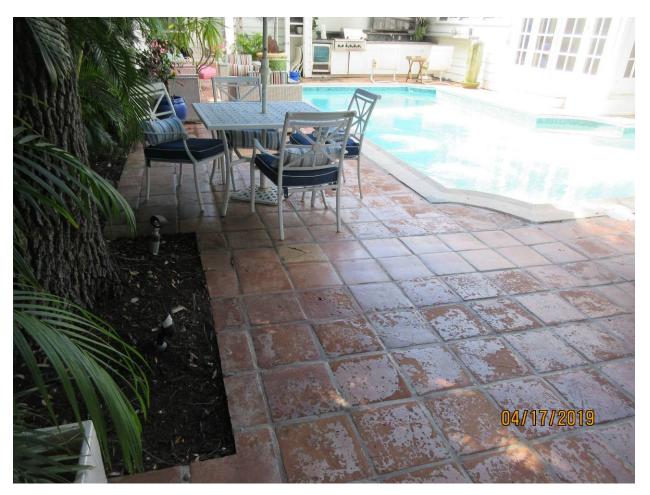




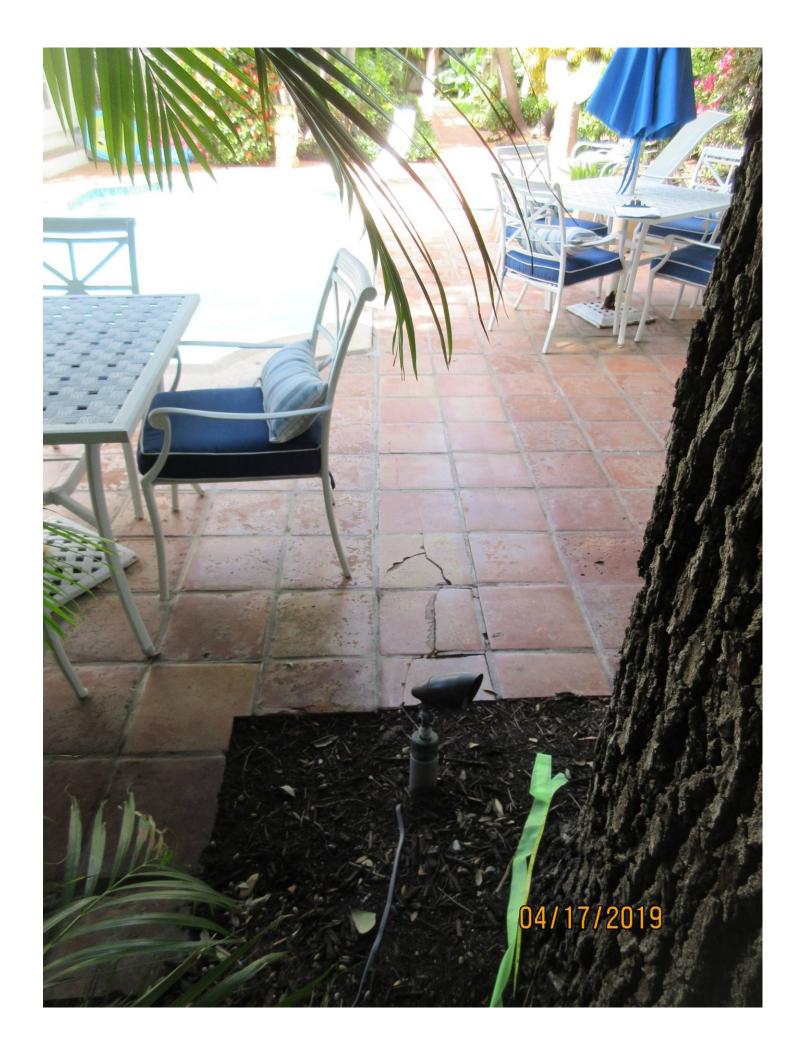


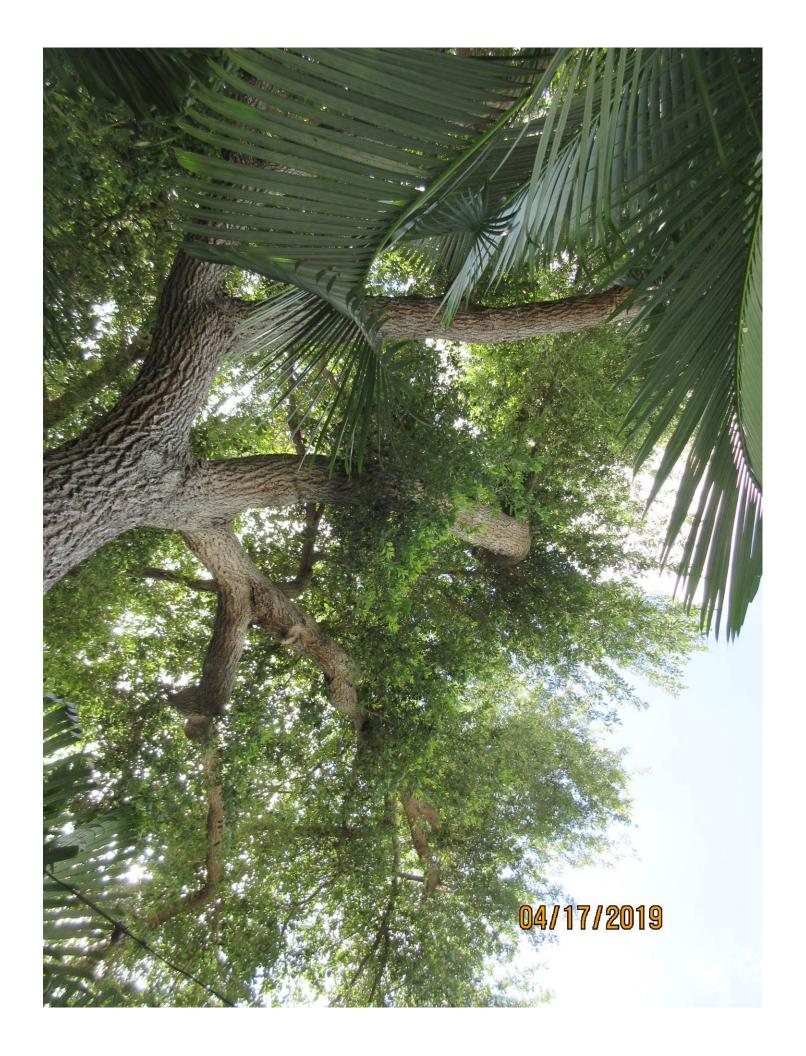
















Diameter: 29.9'' - 24'' = 5.9''

Location: 40% (tree close to property line with a large canopy branch very

close to neighbor's roof, roots impacting tile deck and pool)

Species: 0% (not on protected or not protected tree list)

Condition: 80% (good, large healthy tree, canopy storm damage)

Total Average Value = 40%

Value x Diameter = 2.3 replacement caliper inches

Additional information from property owner requested regarding root damage to pool.

Karen DeMaria

From:

Karen DeMaria

Sent:

Thursday, May 2, 2019 5:32 PM

To:

'tbray@brayco.com'

Cc:

'Sean C'

Subject:

906 Johnson Street tree removal application

Thomas:

Just a reminder that I need additional information regarding the repairs to the pool in relation to the Black Olive tree, for the tree removal application file. I need this information by May 9 in order to be able to send it to the Tree Commissioners for their review.

Sincerely,

Karen

Karen DeMaría
Urban Forestry Manager
Certified Arborist
City of Key West Planning Department
1300 White Street, Key West, FL 33040
305-809-3768



Application





CANOPY REMOVE

2019-0187

Tree Permit Application

	Date: 4/16/19
Please Clearly Print A	Il Information unless indicated otherwise.
Tree Address Cross/Corner Street	900 Johnson Reynolds
Reason(s) for Application:	() Palm () Flowering () Fruit (Shade () Unsure
	Safety (X) Other/Explain below
	on () Same Property () Other/Explain below
	noval () Crown Cleaning/Thinning () Crown Reduction
Other/Explain Moke in t	e to tollow
Reason for Request	
Property Owner Name Property Owner eMail Address Property Owner Mailing Address Property Owner Mailing City Property Owner Phone Number Property Owner Signature Representative Name Representative eMail Address Representative Mailing Address Representative Mailing City Representative Phone Number NOTE: A Tree Representation Authorization for owner will be representing the owner at a Tree	Scay Family Trust The ray R bray 2002 200 Johnson Key west State FC Zip 33040 Keystreeman@gmail.com P.D. Box 430204 Big Pine Key State FL Zip 33043 Jos) 900 - 8448 Jorn must accompany this application if someone other than the Commission meeting or picking up an issued Tree Permit. Tree Representation Authorization form attached () this area including cross/corner Street >>>>
Please ident TREE - CARACE - C	Cify tree(s) with colored tape Chan Marine Reynolds Tohnson

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

Updated: 02/22/2014



Tree Representation Authorization

	Date: 4/16/19
Tree Representation Authorization	sion meeting on the date when your request will be to expedite the resolution of your application. This on form must accompany the application if the property e someone else pick up the Tree Permit once issued.
Please Clearly Print All Information unless indicated otherwise.	
Tree Address	906 Johnson
Property Owner Name Property Owner eMail Address Property Owner Mailing Address	thrayobrayio org
Property Owner Mailing City Property Owner Phone Number Property Owner Signature	(614) 206-2643 State Zip
Representative Name Representative eMail Address Representative Mailing Address Representative Mailing City Representative Phone Number	Treeman, LLC Sean Creedon Keystreeman & gmail.com P.D. Box 430204 Big Pine Key State FL Zip 33043 (305) 900 - 8448
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	
The forgoing instrument was acknowle	edged before me on this 16th day April 2019
By (Print name of Affiant) Thomas P produced FLDC	who is personally known to me or has as identification and who did take an oath.
NOTARY PUBLIC Sign Name: Maratula Print Name: Maratula	Notary Public - State of Florida (seal)

MIA CASTILLO

EXPIRES: June 12, 2022

Updated: 02/22/2014

My Commission Expires: