

STAFF REPORT

DATE: May 3, 2019

RE: **951 Caroline Street (permit application # T2019-0194)**

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

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

Tree Species: Green Buttonwood (Conocarpus erectus)











Diameter: 17.8"

Location: 40% (root issues with structures-sidewalk access, bike racks, street light. If tree fails, the target area is the pedestrian sidewalk)

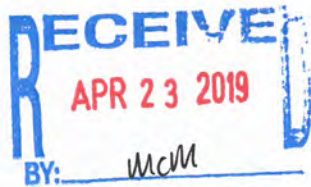
Species: 100% (on protected tree list)

Condition: 30% (fair overall health, safety risk due to partial root ball uplifted from storm)

Total Average Value = 56%

Value x Diameter = 9.9 replacement caliper inches

Application



canopy
removal

2019-0194

Tree Permit Application

Date: 4-23-19

Please Clearly Print All Information unless indicated otherwise.

Tree Address 951 Caroline St. Key West, FL 33040
Cross/Corner Street Caroline St
List Tree Name(s) and Quantity Green Buttonwood (1)
Species Type(s) check all that apply () Palm () Flowering () Fruit (X) Shade () Unsure
Reason(s) for Application:

(X) REMOVE () Tree Health (X) 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 Storm damage from Irma

Property Owner Name Conch Harbor Retail Center, LLC.
Property Owner eMail Address gina.m.kennedy@hotmail.com
Property Owner Mailing Address 951 Caroline St.
Property Owner Mailing City Key West State FL Zip 33040
Property Owner Phone Number (305) 240-0707
Property Owner Signature Gina Kennedy

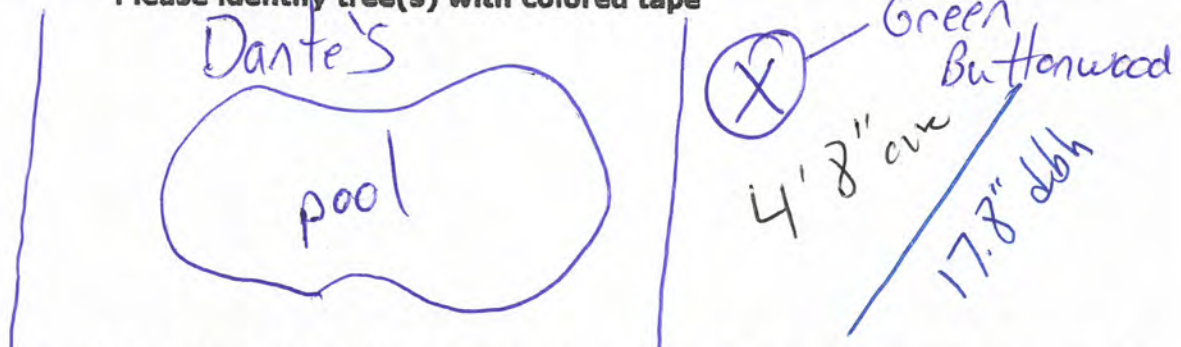
Representative Name Just Keys Trees
Representative eMail Address Justkeystrees@comcast.net
Representative Mailing Address 5550 5th Ave Suite #6
Representative Mailing City Key West State FL Zip 33040
Representative Phone Number (305) 735-4656

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: April 23, 2019

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 951 Caroline St. Key West, FL 33040

Property Owner Name Conch Harbor Retail Center, LLC.

Property Owner eMail Address ginamkennedy@hotmail.com

Property Owner Mailing Address 951 Caroline St.

Property Owner Mailing City Key West State FL Zip 33040

Property Owner Phone Number (305) 294 - 2933 - 305-240-0707

Property Owner Signature G Kennedy

Representative Name Just Key's Trees

Representative eMail Address Justkystrees@comcast.net

Representative Mailing Address 5550 5th Ave Suite #6

Representative Mailing City Key West State FL Zip 33040

Representative Phone Number (305) 735 - 4656

I Gina Kennedy, 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

G Kennedy

The forgoing instrument was acknowledged before me on this 23 day April.

By (Print name of Affiant) Gina Marie Kennedy who is personally known to me or has produced FL Driver License as identification and who did take an oath.

NOTARY PUBLIC

Sign Name: Sumike Crider

Notary Public - State of Florida (seal)

Print Name: Sumike Crider

My Commission Expires: _____

