



## Tree Permit Application

Please Clearly Print All Information unless indicated otherwise. Date: \_\_\_\_\_

**Tree Address** \_\_\_\_\_

**Cross/Corner Street** \_\_\_\_\_

**List Tree Name(s) and Quantity** \_\_\_\_\_

**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 Trim ( ) Branch Removal ( ) Crown Cleaning/Thinning ( ) Crown Reduction

**Additional Information and  
Explanation** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Property Owner Name** \_\_\_\_\_

**Property Owner email Address** \_\_\_\_\_

**Property Owner Mailing Address** \_\_\_\_\_

**Property Owner Phone Number** \_\_\_\_\_

**Property Owner Signature** \_\_\_\_\_

**Representative Name** \_\_\_\_\_

**Representative email Address** \_\_\_\_\_

**Representative Mailing Address** \_\_\_\_\_

**Representative Phone Number** \_\_\_\_\_

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

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 \_\_\_\_\_

Tree Address \_\_\_\_\_

Property Owner Name \_\_\_\_\_

Property Owner Mailing Address \_\_\_\_\_

Property Owner Mailing City, \_\_\_\_\_

State, Zip \_\_\_\_\_

Property Owner Phone Number \_\_\_\_\_

Property Owner email Address \_\_\_\_\_

Property Owner Signature \_\_\_\_\_

Representative Name \_\_\_\_\_

Representative Mailing Address \_\_\_\_\_

Representative Mailing City, \_\_\_\_\_

State, Zip \_\_\_\_\_

Representative Phone Number \_\_\_\_\_

Representative email Address \_\_\_\_\_

I \_\_\_\_\_ 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 \_\_\_\_\_

The forgoing instrument was acknowledged before me on this \_\_\_\_\_ day \_\_\_\_\_ .

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

**Notary Public**

Sign name: \_\_\_\_\_

Print name: \_\_\_\_\_

My Commission expires: \_\_\_\_\_ Notary Public-State of \_\_\_\_\_ (Seal)