



Tree Representation Authorization

Date: _____

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 _____

Property Owner Name _____

Property Owner eMail Address _____

Property Owner Mailing Address _____

Property Owner Mailing City _____ **State** _____ **Zip** _____

Property Owner Phone Number (____) _____ - _____

Property Owner Signature _____

Representative Name _____

Representative eMail Address _____

Representative Mailing Address _____

Representative Mailing City _____ **State** _____ **Zip** _____

Representative Phone Number (____) _____ - _____

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 if 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: _____ Notary Public - State of Florida (seal)

Print Name: _____

My Commission Expires: _____