Work Order 402733

402733
TREES
Trees - Limb Removal
580 VALLE VISTA AV
FLORES, HERBERT E

From Request 375568: Code: TREE_DOWN Description: Tree - Down

Details:

Comments: Caller:

Q: Please describe the precise location of the tree.

A: 580 & 584 VALLE VISTA AVE

Q: Is the tree blocking the street, sidewalk, or the driveway or entrance to the building?

A: Street

Q: Has there been any damage to cars, house, wires, other?

A: Don't Know / No Answer

By KELLY, JANINE: 7/12/2011 1:15:46 PM

EMAIL REQUEST- LARGE TREE LIMB DOWN BLOCKING STREET, SIDEWALK AND

DRIVEWAY AT 580 VALLE VISTA AVE.

By KELLY, JANINE: 7/12/2011 1:19:20 PM REPORTED TO HERB FLORES AT 1:19 PM. By OTTEN, RUSSELL D: 7/18/2011 7:21:33 AM

LD

Priority	1 - Emergency
Supervisor	ZAHN, ROBERT C
Cityworks Project Name	
Initiated By	OTTEN, RUSSELL D
Initiated Date	7/18/2011 7:19:34 AM
Actual Start Date	7/12/2011 1:15:00 PM
Actual Finish Date	7/12/2011 3:30:00 PM
Police Beat	14Y
Service Delivery District	3
City Council District	CCD2
Total Entities (GIS Assets) on Work Order	1
Units Accomplished	1
Units Accomplished Description	Units (Trees)
Total Work Order Cost	\$641.52
Total Of Work Order Labor Costs	\$302.22
Total Of Work Order Material Costs	\$0.00
Total Of Work Order Equipment Costs	\$339.30

Labor

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$142.22	ONK, JOSHUA	2.25	7/12/2011 1:15:00 PM	7/12/2011 3:30:00 PM
\$160.00	TOVAR, JERONIMO	2.25	7/12/2011 1:15:00 PM	7/12/2011 3:30:00 PM

Equipment

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	Equip Unit Cost	Equipment Rate Type
\$26.55	4079 - AERIAL 55FT WITH CHIPPER BODY	4079	2.25	7/12/2011 1:15:00 PM	7/12/2011 3:30:00 PM	\$26.55	Hourly
\$119.25	4818 - DUMP TRUCK W/CAB	4818	2.25	7/12/2011 1:15:00 PM	7/12/2011 3:30:00 PM	\$119.25	Hourly
\$193.50	7532 - 07-BANDIT 250XP TRIALER MOUNTED CHIPPER	7532	2.25	7/12/2011 1:15:00 PM	7/12/2011 3:30:00 PM	\$193.50	Hourly

Work Order 770723

Work Order ID #	770723
Work Order Category	TREES
Work Order Description	Trees - Limb Removal
Work Order Address	580 VALLE VISTA AV
Submit To	LIZARRAGA, GEORGE

By LIZARRAGA, GEORGE: 6/16/2016 6:49:17 AM Removed limb on top of vehicle. W/C 6/15/16

By LIZARRAGA, GEORGE: 6/16/2016 7:00:12 AM

Black Mercedes Lic. #7KXY021 - damages to hood and fender.

By LIZARRAGA, GEORGE: 6/16/2016 7:17:44 AM

Additional car. Toyota Prius blue Lic. # 7HLY276 - damages broken windshield , dents on roof and scratches

Priority	1 - Emergency
Supervisor	ZAHN, ROBERT C
Cityworks Project Name	- Constant C
Initiated By	LIZARRAGA, GEORGE
Initiated Date	6/16/2016 6:46:08 AM
Actual Start Date	
Actual Finish Date	
Police Beat	14Y
Service Delivery District	3
City Council District	CCD2
Total Entities (GIS Assets) on Work Order	1
Units Accomplished	1
Units Accomplished Description	Units (Trees)
Total Work Order Cost	\$0.00
Total Of Work Order Labor Costs	\$0.00
Total Of Work Order Material Costs	\$0.00
Total Of Work Order Equipment Costs	\$0.00

Labor	· ·			
Labor Cost	Labor Name	Hours	Start Date	Einich Data

Equipment

Equipment Description Equip ID Hours Start Date Finish Date Equip Unit Cost Equipment Rate Type

Material					
Material Cost	Description	Material UID	Mat Unit	Units	
			Cost	Required	

Entities			
Entity UID	Entity Type		
78913	TREES CITYWIDE	\neg	

Custom Field Names	Custom Field Value
PRUNING REASONS	
PRUNING TYPES	
TREE DESIGNATION	
PERMIT TYPE	
PERMIT NUMBER	7
CUSTOM PRIORITY	
CAUSE OF DAMAGE	Normal Wear and Tear
PRUNING REASONS 2	

Work Order 772540

Work Order ID #	772540
Work Order Category	TREES
Work Order Description	Trees - Tree Removal
Work Order Address	580 VALLE VISTA AV
Submit To	FLORES, HERBERT E

From Request 661667:

Code: TREE_DEAD_LEAN_SPLIT

Description: Tree - Diseased, Dead, Dying, Leaning, or Split

Details:

Comments: By CRIDDLE, DEON: 6/17/2016 1:08:36 PM

CITIZEN IS REPORTING A UNSTABLE TREE, LOCATED AT 580 VALLE VISTA AVENUE.

PER SABRINA JONES-STANDBY FOLLOW UP TREE ISSUE

Hi Robert -

I was contacted by regarding follow up from as recent "tree limb down" incidents on June 15, 2016; 6:30pm. Per our crews were onsite at 8:00pm to abate the limb down. Citizen states that "Javier" indicated that the actual tree seemed unstable and may need to come down. Do you know if there was follow up? would like a call back as she is very concerned about the safety of the tree.

I am looping her in this email as well.

Caller:

Q: Please describe the precise location of the tree.

A:

Q: Is the tree dead, leaning, or split?

A: Leaning

Q: Has the lean changed recently?

A: NO

By LAWSEN, TOD H: 6/23/2016 7:29:00 AM

Remove 1(L) pear that has a wound that is 50% of the circumference of the trunk. In the wound area there is decay and mushrooms. The tree has had two limb failures in the past.

Priority	2 - High
Supervisor	ZAHN, ROBERT C
Cityworks Project Name	
Initiated By	LAWSEN, TOD H
Initiated Date	6/23/2016 7:21:22 AM
Actual Start Date	
Actual Finish Date	
Police Beat	14Y
Service Delivery District	3
City Council District	CCD2
Total Entities (GIS Assets) on Work Order	1
Units Accomplished	1
Units Accomplished Description	Units (Trees)
Total Work Order Cost	\$83.11
Total Of Work Order Labor Costs	\$63.21
Total Of Work Order Material Costs	\$0.00
Total Of Work Order Equipment Costs	\$19.90

Labor

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$63.21	LAWSEN, TOD H	1.00	6/23/2016 12:00:00	
			AM	

Eq	ui	p	m	ıe	n

Equipment	Description	Equip ID	Hours	Start Date	Finish Date	Equip Unit	Equipment

MAGIC	INCIDENT#	
CATATAC		

PUBLIC WORKS AGENCY OVERTIME ACTIVITY LOG SHEET

EVENT: EMERGETICY	CALL-OUT	DATE:	6/10-6/17	
DEPT: □DIO ☑DFE □I	DCSD	DIVISION: TRUE		
WEATHER: ☐ HOT ☐ MII		CLEAR CLOUDY	□OVERCAST □RAIN	
LOCATION (Specific Address):	1	5 SMAKE RO	2.56	
NATURE OF COMPLAINT: _	6/11 4021	QUIGET	2.50	
	4/12 132		2,50	
ACTION TAKEN:	6/13 581	9 E.177	2.50	
	E/15 586	VACLE VI	ista 3	t
FOLLOW UP REQUIRED:				
MATERIALS USED:			1	
SUPERVISOR (PRINT):		EMPLOYEE NAME	E (PRINT):	
LEADER NAME (PRINT):		EMPLOYEE NAME	E (PRINT):	
EMPLOYEE NAME (PRINT): LIZA	maux	EMPLOYEE NAME	E (PRINT):	*****
EMPLOYEE NAME (PRINT): 1000	L	EMPLOYEE NAME	E (PRINT):	
EMPLOYEE NAME (PRINT):		EMPLOYEE NAME	E (PRINT):	
EMPLOYEE NAME (PRINT):		EMPLOYEE NAME (PRINT):		
EQUIPMENT USED:		MILEAGE IN:	MILEAGE OUT:	
EQUIPMENT USED:		MILEAGE IN:	MILEAGE OUT:	
EQUIPMENT USED:		MILEAGE IN:	MILEAGE OUT:	***************************************
EQUIPMENT USED:		MILEAGE IN:	MILEAGE OUT:	***************************************
EQUIPMENT USED:		MILEAGE IN:	MILEAGE OUT:	***************************************
EQUIPMENT USED:	***************************************	MILEAGE IN:	MILEAGE OUT:	
EQUIPMENT USED:		MILEAGE IN:	MILEAGE OUT:	
DATE IN: D.	ATE OUT:	TIME IN:	TIME OUT:	
AMOUNT OF OVERTIME API	PROVED:	MEAL AL	LOWANCES:	
SUPERVISOR SIGNATURE:	1	1	DATE: <u>6/17/16</u>	

Issued 5/30/2006 May be required for FEMA reimbursement purposes. 350-5 (7-06) Department to maintain for 7 years from activity date.