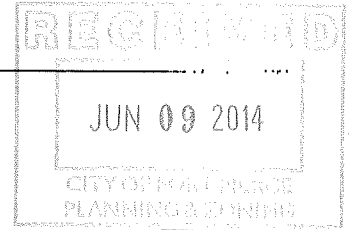




CITY OF FORT PIERCE

PLANNING DEPARTMENT

COMPREHENSIVE PLANNING & DEVELOPMENT REVIEW
HISTORIC PRESERVATION & URBAN DESIGN & URBAN FORESTRY & ZONING



VARIANCE

Property address or Location 1613 THUMB POINT DR.
Parcel ID #(s) 2401-605-0024-000-8
Project description CONSTRUCTION OF SINGLE FAMILY RESIDENCE

DENNIS & JACKLYN KOEHL
Property Owner(s)

P.O. BOX 93
Street Address

MATAGORDA TX 77457
Street Address

979-216-7169
City State Zip

JAKJARA @ GMAIL.COM
Phone Number

Email Address

LARRY KOZOY
Applicant/Representative, Title, Company

1606 THUMB POINT DR.
Street Address

FT. PIERCE FL 34949
Street Address

772-618-5327
City State Zip

LARRY @ KOZOYENTERPRISES.COM
Phone Number

Email Address

Property Owner(s) Acknowledgements: - This application will not be considered complete without the signature of all property owners of record, which shall serve as an acknowledgement of the submission of this application. The property owner's signature below shall also authorize the Applicant (if other than the property owner) and/or its representative to act in his/her behalf for the purposes of seeking approval for the application described herein.

Dennis Koehl Jacklyn Koehl
Property Owner(s) Signature(s)

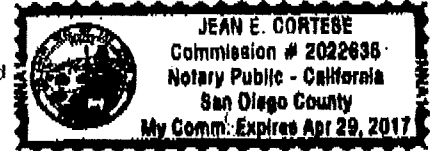
STATE OF California COUNTY San Diego

The foregoing instrument was acknowledged before me this 3rd day of June, 2014, by

Dennis L Koehl & Jacklyn Koehl who is personally known to me or has produced

Driver's license as identification.

Jean E Cortese
Signature of Notary



(seal)

INTAKE MEETINGS ARE REQUIRED FOR ALL SUBMITTALS. CALL (772) 467-3739

TO BE COMPLETED BY STAFF

Zoning	Future Land Use	Total Acres	Historic District	Historic Designation	
				Contributing	Individual
				Non-Contributing	None

Pre-Application Meeting Date _____ Fees _____ Control # _____ B. Permit # _____

Intake Planner _____

Planner Assigned _____

Approved By _____ Date _____

Comments _____



Intake Date Stamp

VARIANCE

Submit eight (8) hard copies and one (1) CD of the following for initial submittal, subsequent submittals will be required:

- Site plan, to scale, including all relevant improvements:
 - Existing & proposed structures
 - Landscaping & parking,
 - Fencing, signs, etc.
- As-built Survey
- Criteria Narrative
- Complete, notarized application

Description of request: Request to deviate from the 25% lot coverage requirement within City Code Section 22-24(b)(3) based on special circumstances. Please see attached.
 Reason for request: _____

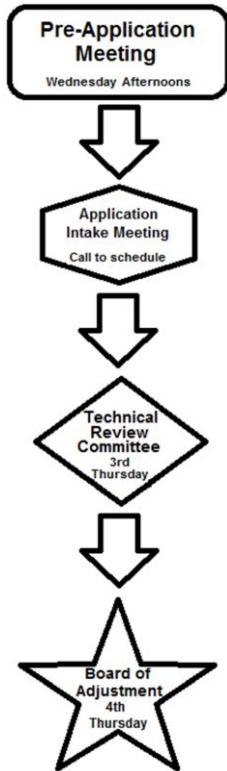
Existing Use : Vacant Residential Date Property was Purchased: 3/14/2014

Alterations made to the site since purchase: None.

Has a request for this variance been denied in the past? Yes No

If yes, what has changed since the denial? _____

Application Outlook



Criteria:

In order to determine whether your request for Variance meets all the criteria in Section 22-108 of the City Code, please answer the following questions. Please provide answers of questions on separate pages:

1. Describe those conditions peculiar to the specific property and not applicable to other lands, structures, or buildings in the same zoning district.
2. Does special conditions or circumstances result from actions other than that of yours? Please explain
3. Identify any undue hardships or deprivation of commonly enjoyed property rights that would result in the literal interpretation of the code for the zoning district.
4. What is the minimum variance that would give the reasonable use of the land, building, or structure?
5. Explain how the variance request would not impair the intent of the zoning ordinance or be detrimental to the general public welfare:

PROPERTY RECORD CARD

Dennis L Koehl Record: 1 of 1

<<Prev

Next >>

Spec.Assmnt

Taxes

Exemptions Permits Home Print

Property Identification

Site Address: 1613 Thumb Point Dr
 Sec/Town/Range: 01 :35S :40E
 Map ID: 24/01E
 Zoning: R1

ParcelID: 2401-605-0024-000-8
 Account #: 15207
 Use Type: Vac Res
 City/Cnty: Fort Pierce



Ownership and Mailing

Owner: Dennis L Koehl Jacklyn A Koehl
 Address: PO Box 93
 Matagorda TX 77457

Legal Description

THUMB POINT BLK 1 LOT 24 (OR 3612-1676)

Sales Information

Date	Price	Code	Deed
3/14/2014	575000	0001	WD
3/11/2009	100	0130	WD
7/1/1974	97000	00	CV

Assessment 2013

2013 Final:	382000
Assessed:	382000
Ag.Credit:	0
Exempt:	
Taxable:	
Taxes:	9763.66

Total Land and Building

Land Value:	382000	Acres:	0.47
Building Value:	0		
Finished Area:	0	SqFt	

BUILDING INFORMATION

No Sketch
 Available



Exterior Features

View:	-	RoofCover:	-	RoofStruct:	-
ExtType:	-	YearBlt:	-	Frame:	-
Grade:	-	EffYrBlt:	-	PrimeWall:	-
StoryHght:	-	No.Units:	-	SecWall:	-

Interior Features

BedRooms:	-	Electric:	-	PrmIntWall:	-
FullBath:	-	HeatType:	-	AvgHt/Ft:	-
1/2Bath:	-	HeatFuel:	-	Prm.Flors:	-
%A/C:	-	%Heated:	-	%Sprinkled:	-

Special Features and Yard Items

Type	Y/S	Qty.	Units	Qual.	Cond.	YrBlt.	No.	Use Type	Type	Measure	Depth
SCON - SEAWALL CONC	Y	1	92	AV	AV	2002	1	0000-Vac Res	IFWW-Front Ft	121	170
SCOR - SEAWALL CORG	Y	1	36	AV	AV	2002					

Land Information

THIS INFORMATION IS BELIEVED TO BE CORRECT AT THIS TIME BUT IT IS SUBJECT TO CHANGE AND IS NOT WARRANTED.

Prepared by and return to:

Frank H Fee, III
Chief Executive Officer
Treasure Coast Abstract & Title Insurance Co.
426 Avenue A
Fort Pierce, FL 34950
772-461-7190
File Number: 14-1028
Consideration: \$575,000.00

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 14th day of March, 2014, between SuLin, LLC, a Florida limited liability company, whose post office address is 7842 Sabal Lake Drive, Port Saint Lucie, FL 34986, grantor, and Dennis Lee Koehl and Jacklyn Ann Koehl, husband and wife, whose post office address is PO Box 93, Matagorda, TX 77457, grantee:

(Whenever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Saint Lucie County, Florida to-wit:

Lot 24, Block 1, Thumb Point, according to the plat thereof as recorded in Plat Book 10, Page 79, Public Records of St. Lucie County, Florida

Parcel Identification Number: 2401-605-0024-000-8

SUBJECT TO restrictions, reservations, limitations, and easements of record, if any; this reference to said restrictions shall not operate to reimpose the same, and taxes for the year 2013 and subsequent years.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2013.

(Execution of grantor appears on following second page.)

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

[Handwritten Signature]

First Witness Signature

FRANK W. FEE, II

First Witness Printed Name

SuLin, LLC,
a Florida limited liability company
[Handwritten Signature]
By: _____
Ronald S. Grober, MD, Manager

[Handwritten Signature]

Second Witness Signature

Jennifer Anne Hodl

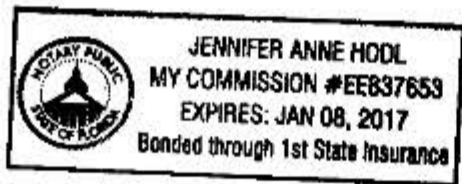
Second Witness Printed Name

State of Florida
County of Saint Lucie

COPY

The foregoing instrument was acknowledged before me this 14th day of **March, 2014**, by **Ronald S. Grober, MD**, in his capacity as **Manager of SuLin, LLC**, a **Florida limited liability company**, on behalf of said company. He [] is personally known or [] has produced a driver's license as identification.

[Notary Seal]



[Handwritten Signature]

Notary Public
Printed Name: Jennifer Anne Hodl
My Commission Expires: 1/8/2017

COPY