



CITY OF FORT PIERCE

DIVISIONS OF CODE ENFORCEMENT & ANIMAL CONTROL

MARGARET M. ARRAIZ, CODE COMPLIANCE MANAGER

REQUEST FOR A REDUCTION OR RESCINDMENT OF CODE ENFORCEMENT FINES / LIENS

RECEIVED

DEC 17 2013

CODE ENFORCEMENT
CITY OF FT. PIERCE

Date:		12/17/13	
Property address:		1354 Bayshore Drive, Fort Pierce, Fla 34949	
Owner(s) of record:		Gertrude Elliot	
Mailing address:		1354 Bayshore Drive, Fort Pierce, Fla 34949	
Property tax ID #:		2401-621-0010-000-7	
Original purchase date:	Aug 22, 2000	Original purchase price:	\$ 128,500.00
Other Information:	<input checked="" type="checkbox"/> Inherited Property	<input checked="" type="checkbox"/> Purchased at Tax Sale	<input checked="" type="checkbox"/> Adjoining Property Owner
Property is used for:	<input checked="" type="checkbox"/> Single Family	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial
		<input type="checkbox"/> Industrial	<input type="checkbox"/> Vacant Lot
Name of person requesting reduction:	Gertrude Elliot	Relationship to owner(s):	
Telephone #:	772-252-4550	Mobile phone #:	772-336-4676
E-mail:	N/A	Preferred contact method:	Home ph # 772-252-4550
What are owner(s) intentions for property:	to reside in this home		
Amount of Fine:	75790.	Date Fine Initiated:	
Are there current code violations?	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	Explain: (please attached notice)
Is a lien filed against the property?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	If yes, what is the lien amount? \$ 75790
Is property listed for sale?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, what is listing price?
Is property under contract for sale?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, what is the sale price?

AMOUNT OF FINE / LIEN \$ 75,790.

DOLLAR AMOUNT REQUESTING TO BE WAIVED \$ 0

DOLLAR AMOUNT I AGREE TO PAY \$ 0

If the city waives any fees, interest, penalties, fine or lien amount, the undersigned does hereby agree to pay the remainder within sixty (60) days from the date of the Board, Magistrate or Commission's decision unless an alternate time frame is specified in the motion.

Gertrude Elliot
(Signature of Owner or Representative)

Gertrude Elliot
(Printed Name)



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REQUEST FOR REDUCTION OF PENALTY

By completing this form, you are making statements under oath. Failure to be truthful is a violation of Fort Pierce City Code and Florida Statutes pertaining to perjury, which is a felony punishable by up to fifteen (15) years imprisonment.

INSTRUCTIONS:

1. Please fill in blanks completely.
2. Be specific when writing your statement. Use additional pages if necessary.
3. If you are claiming medical or financial hardship, attach supporting documentation (i.e. doctor's statement or proof of income).
4. Complete either the application for Waiver of Penalties (lot clearing / demolition) or Request for Reduction / Rescindment (code enforcement fines).
5. For lot clearing or demolition liens, contact Kathy D'Arton in the Finance Department (772-467-3076) for cost / fees breakdown.
6. For code enforcement liens (those imposed by a Special Magistrate or Code Enforcement Board), contact Colleen Greer (772-467-3149) for cost / fees breakdown.
7. If you do not have access to a Notary of the Public, one will be provided to you by the Department at no charge. All forms must be signed in the presence of the Notary to be valid.
8. Return this form, the application and any other pertinent documentation to the Code Enforcement Department.
9. Requests for Reduction / Rescindment of code enforcement liens must be heard before either the Code Enforcement Board or Special Magistrate prior to being heard before the City Commission.

Property Address: 1354 Bayshore Dr. Ft. Pierce, Fla 34949

Property Owner: Gertrude Elliot

Mailing Address: Same as above

Telephone #: 252-4550 Cell Phone #: 332-4676

E-Mail Address: _____

Is the property in compliance? yes If no, please explain _____



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MARGARET M. ARRAIZ, CODE COMPLIANCE MANAGER

I, Gertrude Elliot, do hereby submit this Petition in request for a reduction in the total amount of the penalty imposed and in support offer the following statement:

The reason I was out of compliance was that in the beginning of Jan 2012 I fell & was rushed to emergency, the hospital & doctor placed me in an assisted living facility called Tradition Assisted living facility until I recovered & left Nov 6/2013 & returned back to my home.

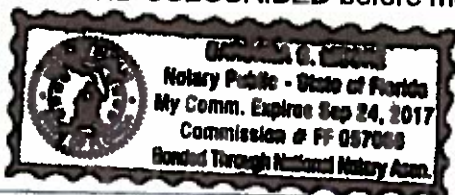
Date: 12/17/2013

Signed: Gertrude Elliot
Print Name: Gertrude Elliot

STATE OF FLORIDA
COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority Gertrude N. Elliot who acknowledged before me that the information contained herein is true and correct. He / She is not personally known to me and has produced FL ID # E430-294-34-683-0 as identification.

SWORN TO AND SUBSCRIBED before me this 17th day of December, 2013.



Barbara G. Arraiz
Notary Public, State of Florida