



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

Date:	10/27/15		
Property address:	2014 Delaware Ave Fort Pierce FL		
Owner(s) of record:	Simon Paul Castor		
Mailing address:	207 Dixie land St Fort Pierce 34982		
Property tax ID #:			
Original purchase date:	8/3/2015	Original purchase price:	7,100.00
Other Information:	<input type="checkbox"/> Inherited Property	<input checked="" type="checkbox"/> Purchased at Tax Sale	<input type="checkbox"/> Adjoining Property Owner
Property is used for:	<input 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:	Simon Paul Castor	Relationship to owner(s):	None
Telephone #:		Mobile phone #:	772 5285202
E-mail:	Castors_ac@yahoo.com	Preferred contact method:	772 5285202
What are owner(s) intentions for property:	rental		
Amount of Fine:	33,630.00	Date Fine Initiated:	
Are there current code violations?	<input checked="" type="checkbox"/> No	<input 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?
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

\$ 33,630.00 ^{sl}

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 33,117.99

DOLLAR AMOUNT I AGREE TO PAY

\$ 512.01

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.

[Signature]
(Signature of Owner or Representative)

Simon Paul Castor
(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: 2014 Delaware Ave Fort Pierce FL

Property Owner: Simon Paul Castor

Mailing Address: 207 Dixieland Dr Fort Pierce 34982

Telephone #: 772 5285202 Cell Phone #: _____

E-Mail Address: Castors.ac@yahoo.com

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



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I, Simon Paul Castor, 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:

I Did Buy the property in Tax deed I didn't know about the liens. When I received the letter I did comply to the code.

Date: 10/27/15

Signed: [Signature]
Print Name: Simon Castor

STATE OF FLORIDA
COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority Simon Paul Castor who acknowledged before me that the information contained herein is true and correct. He She is not personally known to me and has produced FI DR Lic C236-795-68-213-0 as identification.

SWORN TO AND SUBSCRIBED before me this 27th day of October, 2015.



COLLEEN GREER
MY COMMISSION # EE 216024
EXPIRES: November 13, 2016
Bonded Thru Budget Notary Services

Colleen Greer
Notary Public, State of Florida