

Administrative Certificates of Appropriateness

Attached are Certificates of Appropriateness issued administratively in October 2016.

- COA #16-60, 508 N 14th Street – Install new trusses and decking, and replace existing Fiberglass Shingles with GAF Royal Sovereign Shingles, Color – Golden Cedar.
- COA #16-64, 140, 142, 144 and 146 Depot Drive – Replace awnings, color – Sand.
- COA #16-65, 912 Avenue D – Enclose the existing window on secondary façade of non-contributing structure.
- COA #16-66, 317 Orange Avenue – Remove and replace existing storefront double doors with new impact doors. All openings and color will match existing.
- COA #16-67, 300 US Hwy 1 – Remove and replace small flat roof on the electrical shed/room.
- COA #16-68, 201 S 2nd Street, Suite 206 – Install a new wall sign for “Cole Coppola Law Building”.
- COA #16-69, 116 N 2nd Street – Remove existing hand rail and install new code compliant aluminum rail.
- COA #16-70, 808 Delaware Avenue – Remove and replace damage siding below window sills on east and west side of the building.

Bldg. Permit # _____

COA# 16-60



CITY OF FORT PIERCE

PLANNING DEPARTMENT

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

OCT 04 2016

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 508 N 14TH ST

Parcel ID #: 3644-2776-3656-303

Type of Designation: Contributing Non-contributing Site within the _____ Historic District

Individually Designated Site, City Commission Resolution No. _____

Property Owner / Applicant Information

Property Owner(s)

Name(s): John Pajares

Mailing Address: 1696 SE Colony Way

Phone Number(s): 863-812-6221 Email: armeloconstruction@live.com

Applicant

Name(s): SAME

Mailing Address: _____

Phone Number(s): _____ Email: _____

Representative

Name(s): N/A

Mailing Address: _____

Phone Number(s): _____ Email: _____

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

① We, John Pajares as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]
Signature of Owner

10/1/16
Date

Description of Requested Work

Please indicate the type of work requested:

- Fence
- Window(s)
- Shed
- Signage
- Door(s)
- Shutter(s)
- Roof
- Porch
- Rehabilitation
- New Construction
- Demolition
- Relocation

- Site Improvements (describe) Install complete new roof
- Other (describe) _____

Please provide a detailed description of the proposed work to be performed: _____

REMOVE existing roof and TRUSSES and REPLACE with
NEW roof and TRUSSES.

Have other alterations been made to the site within the last 12 months? No Yes, _____

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

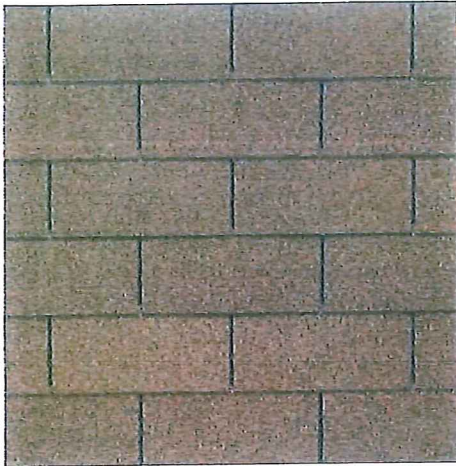
Application Requirements

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
 - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
 - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.

GAF Model 0202350 Internet #100044456 Store SKU #515026

Royal Sovereign Golden Cedar SG 25-Year 3-Tab Shingles (33.33 sq. ft. per Bundle)

★★★★★ (15) [Write a Review](#) [Questions & Answers \(6\)](#)



[Open Expanded View](#)

[Click Image to Zoom](#)

\$21.00 / bundle

If you buy 48 or more

\$16.80 / bundle

- 25 Year Limited Warranty
- Most preferred 3-tab shingle in its class among contractors
- Passes the industry's two toughest wind tests

[Related Items](#) [Product Overview](#) [Specifications](#) [Recommended Items](#) [Questions & Answers](#) [Customer Reviews](#)

Product Overview

Royal Sovereign Shingles have a simple yet timeless beauty. Some people think all 3-tab shingles look pretty much alike. Not so. GAF has gone to great pains to make Royal Sovereign the most beautiful strip shingle you can install. California residents: see [Proposition 65 Information](#)

- Color lock ceramic firing (granules) helps maintain the true shingle color
- Passes the industry's two toughest wind tests - ASTM's 110 MPH and 150 MPH wind tests (under controlled laboratory conditions)
- Micro weave core offers a strong foundation that helps resist cracking and splitting
- May increase your home's resale value
- Designed with Advanced Protection Shingle Technology
- Class A fire rating from underwriters laboratories
- 25-year limited transferable warranty
- See GAF shingle and accessory limited, warranty for complete coverage and restrictions
- Style Guide:

Shingles \$ and underlay want product Appl.





Property Identification

Site Address: 508 N 14th ST
 Sec/Town/Range: 09/35S/40E
 Map ID: 24/09N
 Zoning: R4

Parcel ID: 2409-502-0027-000-7
 Account #: 21304
 Use Type: 0800
 Jurisdiction: Fort Pierce

Ownership

Armelo Construction Group Inc
 1696 SE Colony WAY
 Jupiter, FL 33478-8313

Legal Description

CLYDE KILLER'S A/D BLK 1 LOT 25 (OR 3866-1011)

Current Values

Just/Market Value: \$19,800
 Assessed Value: \$19,800
 Exemptions: \$0
 Taxable Value: \$19,800
 Taxes for this parcel: SLC Tax Collector's Office
 Download TRIM for this parcel: Download PDF



Total Areas

Finished/Under Air (SF): 1,952
 Gross Area (SF): 2,124
 Land Size (acres): 0.18
 Land Size (SF): 7,750

Sale History

Date	Book/Page	Sale Code	Deed	Grantor	Price
May 4, 2016	3866 / 1011	0001	WD	XJD LLC	\$39,000
Jan 13, 2015	3711 / 0574	0001	SP	Barrington Capital Investments LLC	\$11,000
Jan 12, 2015	3711 / 0570	0111	DE	Barrington Capital Investments (TR)	\$0
Jul 15, 2014	3656 / 0303	0111	TR	Redstone Capital LLC (TR),	\$100
Jul 2, 2013	3644 / 2776	0111	QC	Mayfive Capital LLC,	\$8,500
Jun 11, 2013	3527 / 2465	0111	TD	Calixt (TR),Alcinne	\$10,100
Jun 1, 1992	1477 / 1130	XX01	AA	Grimsley,William	\$48,000
Jul 16, 1990	0700 / 0719	XX01	WD	C B Grimsley	\$0
Jul 16, 1990	0699 / 2233	XX01	QC		\$0

Building Information (1 of 2)

Finished Area: 1,056 SF

Gross Total Area: 1,056 SF

Exterior Data

View:
 Building Type: HD
 Grade: D
 Story Height: 1 Story

Roof Cover: Fibrglss Shg
 Year Built: 1949
 Effective Year: 1949
 No. Units: 1

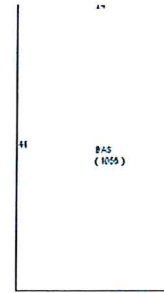
Roof Structure: Hip
 Frame:
 Primary Wall: CB Stucco
 Secondary Wall:

Interior Data

Bedrooms: 0
 Full Baths: 2
 Half Baths: 0
 A/C %: 0%

Electric: MINIMUM
 Heat Type:
 Heat Fuel:
 Heated %: 0%

Primary Int Wall:
 Avg Hgt/Floor: 0
 Primary Floors: A TL/CON
 Sprinkled %: 0%



Sketch Area Legend

Sub Area	Description	Area	Fin. Area	Perimeter
BAS	BASE AREA	1056	1056	136

Building Information (2 of 2)

Finished Area: 896 SF

Gross Total Area: 1,068 SF

Exterior Data

View:
 Building Type: HD
 Grade: D
 Story Height: 1 Story

Roof Cover: Fibrglss Shg
 Year Built: 1953
 Effective Year: 1953
 No. Units: 2

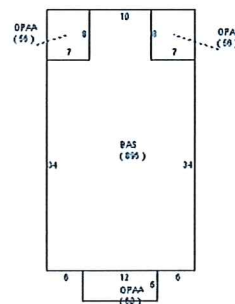
Roof Structure: Gable
 Frame:
 Primary Wall: CB Stucco
 Secondary Wall:

Interior Data

Bedrooms: 0
 Full Baths: 2
 Half Baths: 0
 A/C %: 0%

Electric: AVERAGE
 Heat Type:
 Heat Fuel:
 Heated %: 0%

Primary Int Wall:
 Avg Hgt/Floor: 0
 Primary Floors: A TL/CON
 Sprinkled %: 0%



Sketch Area Legend


Sub Area	Description	Area	Fin. Area	Perimeter
BAS	BASE AREA	896	896	132
OPAA	Open Porch Attached Average	172	0	94

Special Features and Yard Items

Type	Qty	Units	Year Blt
CHAINLINK 4'	1	280	1995

Current Values Breakdown		Current Year Exemption Value Breakdown				
		Tax Year	Grant Year	Code	Description	Amount
Building:	\$17,300					
Land:	\$2,500					
Just/Market:	\$19,800					
Ag Credit:	\$0					
Save Our Homes or 10% Cap:	\$0					
Assessed:	\$19,800					
Exemption(s):	\$0					
Taxable:	\$19,800					

Current Year Special Assessment Breakdown				
Start Year	AssessCode	Units	Description	Amount
1999	0041	1	Fort Pierce Stormwater Charge	\$54.00

This does not necessarily represent the total Special Assessments that could be charged against this property. The total amount charged for special assessments is reflected on the most current tax statement and information is available with the SLC Tax Collector's Office .

Historical Values

Year	Just/Market	Assessed	Exemptions	Taxable
2016	\$19,800	\$19,800	\$0	\$19,800
2015	\$19,400	\$19,400	\$0	\$19,400

Permits

Number	Date	Description	Amount	Fee
BP15-0231	Mar 18, 2015	Re Roof Permit	\$150	\$80
BP15-0232	Mar 18, 2015	Re Roof Permit	\$150	\$80
BP16-1891	Jul 12, 2016	Fence	\$1,200	\$0
BP16-1889	Sep 9, 2016	Alterations/Remodeling	\$3,000	\$0
BP16-1993	Sep 9, 2016	Alterations/Remodeling	\$3,000	\$0

Notice: This does not necessarily represent all the permits for this property.
 Click the following link to check for additional permit data in Fort Pierce

This information is believed to be correct at this time but it is subject to change and is not warranted.
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THE SUNRISE CITY
FORT PIERCE
PLANNING DEPARTMENT
Florida

9/22/2016 → COA APP.



Bldg. Permit # _____

COA# 16-64

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 140,142,144,146 Depot Drive

Parcel ID #: _____

Type of Designation: Contributing Non-contributing Site within the _____ Historic District

Individually Designated Site, City Commission Resolution No. _____

Property Owner/ Applicant Information

Property Owner(s)
Name(s): HAT FIELD

Mailing Address: _____

Phone Number(s): _____ Email: _____

Applicant
Name(s): Larry Kosoy Kosoy Enterprises Inc

Mailing Address: 1600 Thumbpoint Drive FT Pierce

Phone Number(s): 772-618-5327 Email: LarryKosoy@ 34949

Gmail.com

Representative
Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, _____ as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]
Signature of Owner

13 OCT 16
Date

Description of Requested Work

Please indicate the type of work requested:

- Fence Shed Door(s) Roof
- Window(s) Signage Shutter(s) Porch

- Rehabilitation New Construction Demolition Relocation

Site Improvements (describe) _____

Other (describe) _____

Please provide a detailed description of the proposed work to be performed: INSTALL

awnings

Have other alterations been made to the site within the last 12 months? No Yes, _____

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

Application Requirements

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
 - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
 - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.

REVISIONS

10/12/2016

TRIVANTAGE

ORDER, DONE, GOOD CALL



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- My Account
- Quick Order
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Departments

Enter Keyword or Item #

Fabric

Hardware



**Weblon Coastline Plus Awning
62" Sand CP-2700**

Sand

Item # 857200

Having trouble signing into your account? Contact customer service at 1-800-786-1876 Monday - Friday 8:00 am - 7:30 pm ET to set up an account.

Description

Coastline Plus awning fabric is a high performance PVC composite. It features a strong polyester base fabric, with manageable weight for excellent dimensional stability. The top surface is treated with the Rain Kleen® finish for color retention and prolonged fabric life. Coastline Plus is UV, water and mildew resistant. It is also heat-sealable for a strong, waterproof and airtight seal, and it accepts a variety of graphics including pressure sensitive graphics.

FR Standards Met: California State Fire Marshal Title 19, NFPA 701 ASTM E84-81A Flame Spread Rating Class A (15)

Trademark: Weblon®, Coastline Plus® and Rain Kleen® are registered trademarks of Herculite Products Inc.



Specifications

Description:	Vinyl laminated on a weft insertion scrim base of high tenacity filament polyester.
Weight:	15 oz. per lineal yard
Width:	62 inches / 157.48 centimeters
Surface:	Top surface treated with Rain Kleen® for color retention and prolonged fabric life.
Transparency:	Some light color shades offer good illumination.
Abrasion Resistance:	Excellent
Dimensional Stability:	Excellent
Flexibility:	Excellent in both hot and cold environments
Flame Resistance:	Meets California State Fire Marshall Title 19, NFPA-701 ASTM E84-81A Flame Spread Rating Class A (15)
Mildew Resistance:	Excellent
Chemical Resistance:	Excellent
Water Repellency:	Excellent – Water Proof
Oil Resistance:	Excellent
Sewability:	Excellent
Heat Sealability:	Excellent. Can be sealed by hot air weg welder or radio frequency bar type.



HERCULITE®

P.O. Box 435, Emigsville, PA 17318 USA

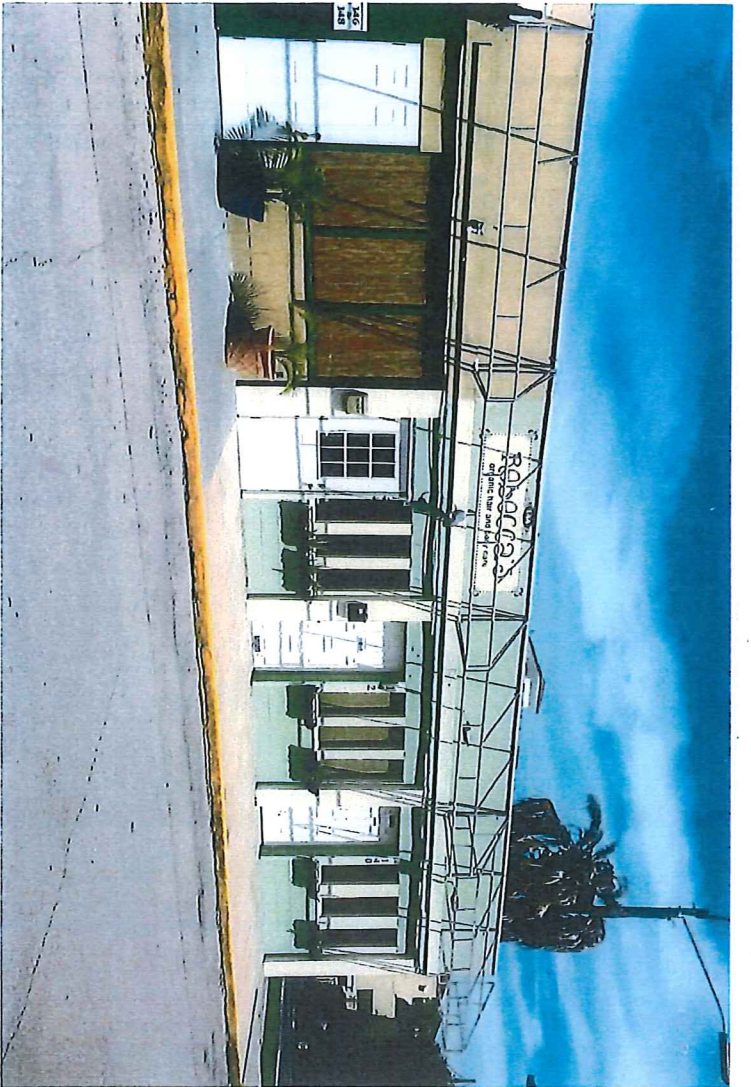
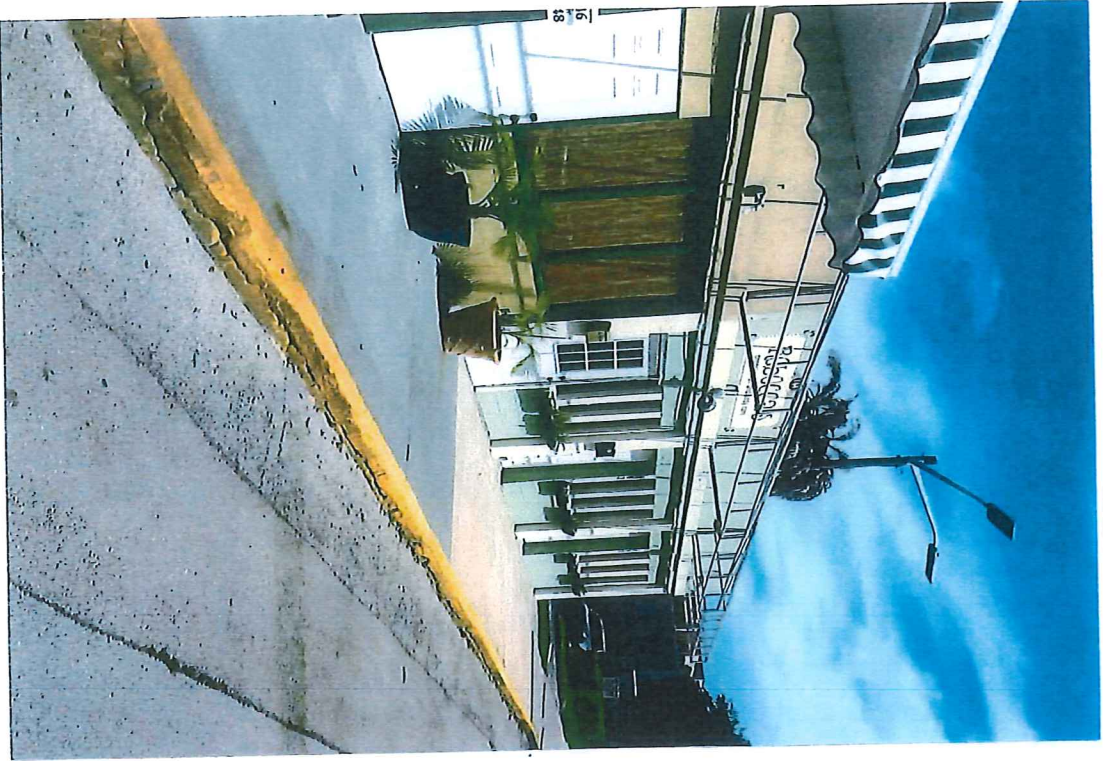
717-764-1192

800-772-0036

Fax: 717-764-5211

www.herculite.com

EMAIL: customer care@herculite.com









CITY OF FORT PIERCE

PLANNING DEPARTMENT

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

OCT 18 2016

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 912 Ave P
Parcel ID #: 241060100860006
Type of Designation: Contributing Non-contributing Site within the _____ Historic District
 Individually Designated Site, City Commission Resolution No. _____

Property Owner/ Applicant Information

Property Owner(s)
Name(s): Choyan Trou Anoy
Mailing Address: 7454 Melisa Dr Jacksonville FL 32210
Phone Number(s): _____ Email: _____

Applicant
Name(s): Lazatha Murphy
Mailing Address: 3403 Ave P Ft Pierce FL 34947
Phone Number(s): 772 370 2920 Email: MurphyLazatha@gmail.com

Representative
Name(s): Terry Calhoun / CB PARADISE / Abyt C Murphy REAL ESTATE
Mailing Address: 411 W. U.S. Hwy #1
Phone Number(s): (772) 388-6378 Email: TERRYCALHOUNCAM@aol.com

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, Terry Calhoun Manager as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.
on Behalf of owner
Signature of Owner (military) 10/14/16
Date

Description of Requested Work

Please indicate the type of work requested:

- Fence
- Window(s)
- Shed
- Signage
- Door(s)
- Shutter(s)
- Roof
- Porch

- Rehabilitation
- New Construction
- Demolition
- Relocation

Site Improvements (describe) Window will be frame close with 2x4
 Other (describe) with 5/8 plywood and wire lap for stucco

Please provide a detailed description of the proposed work to be performed: _____

Have other alterations been made to the site within the last 12 months? No Yes, _____

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

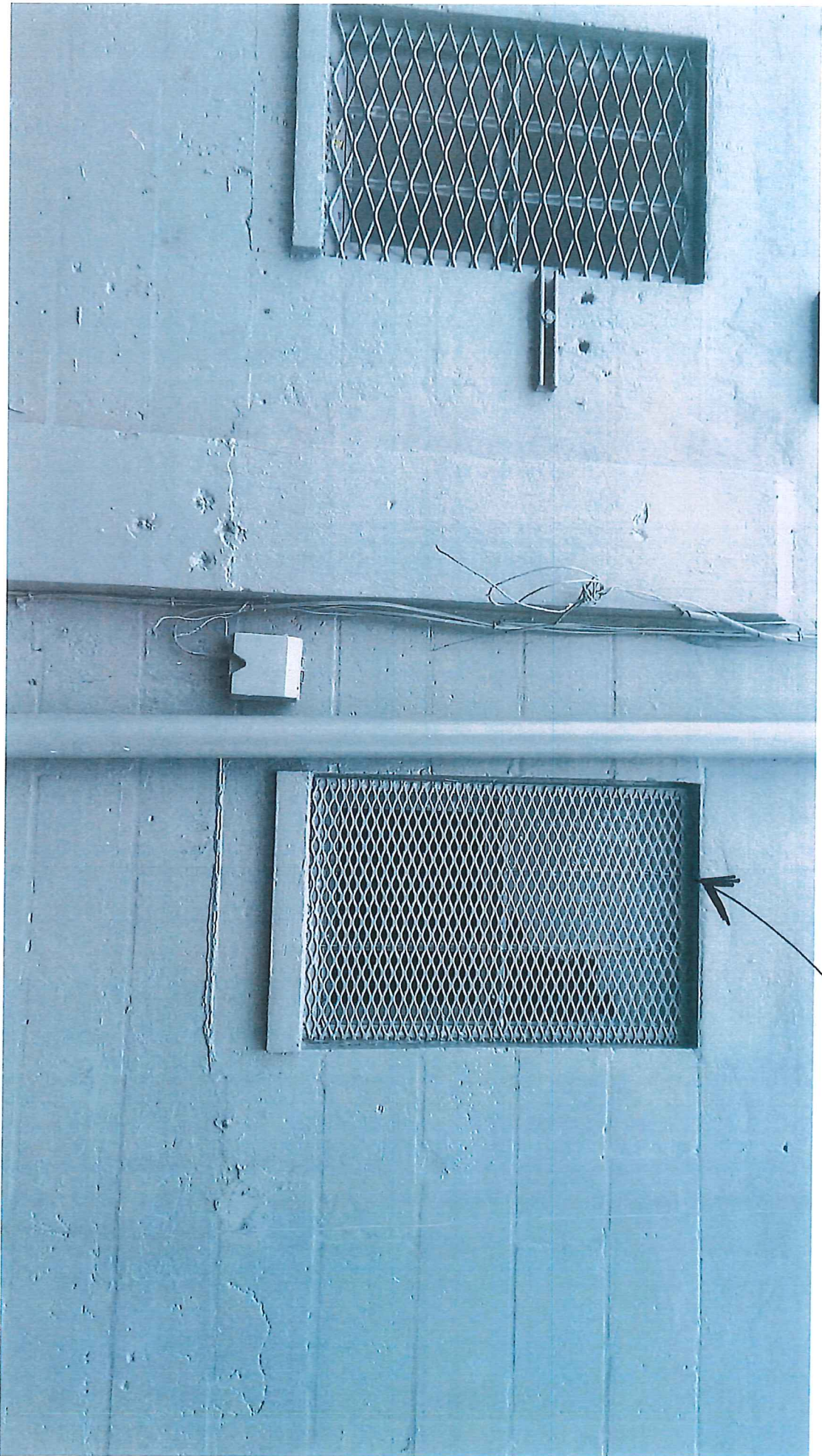
Application Requirements

- \$10.00 Application fee
 - Site Plan with dimensions.
 - Architectural Drawings:
 - > Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
 - > Drawings should indicate materials to be used.
 - Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
 - Material(s) specifications and/or sample(s)
 - Color samples.
-
- Demolition – Plans for what will be taking the demolished structure’s place should be submitted.

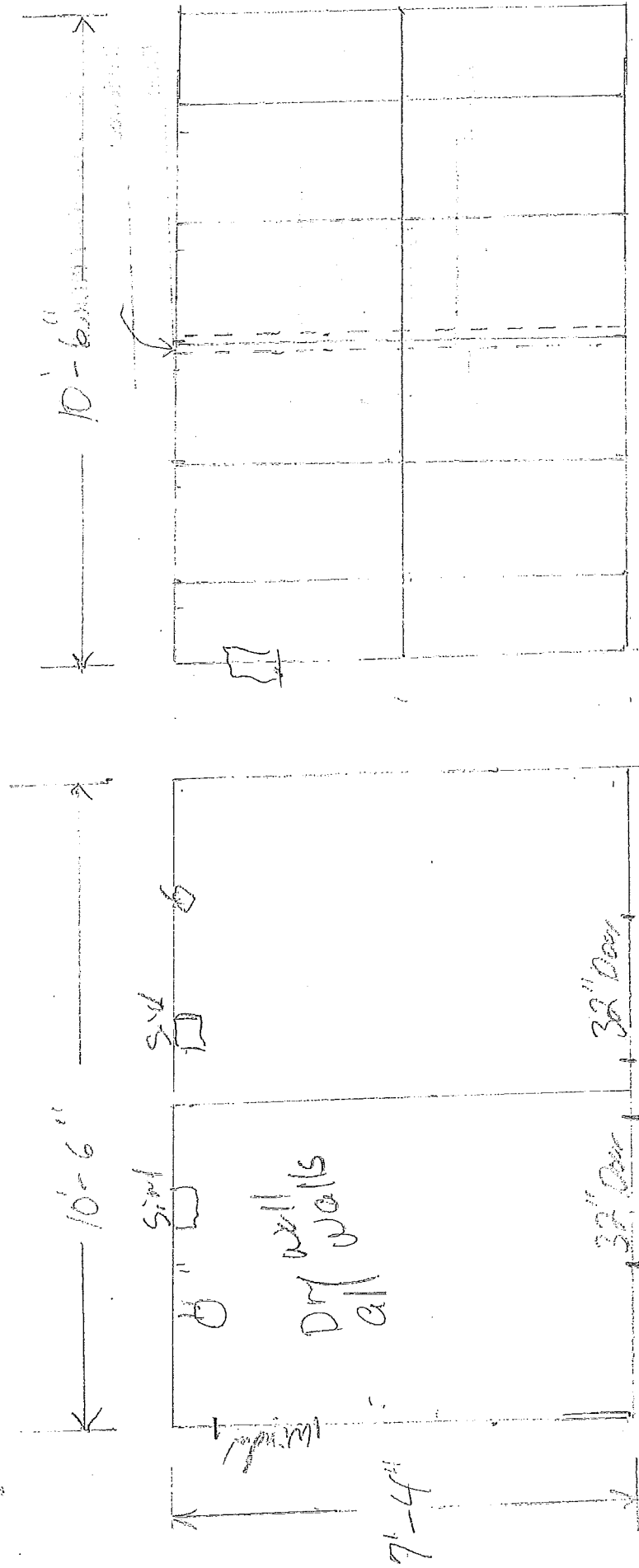


WINDOWS TO
BE ENCLOSED

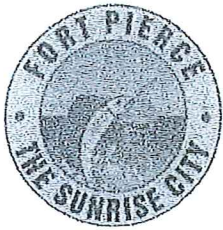




SUBJECT
WINDOWS



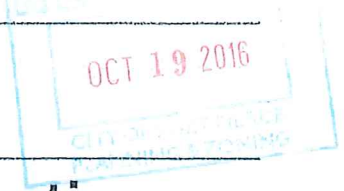
Wall section will be 8' steel 3' high
 Suspended ceiling 8' high with 2' feet by 4' feet
 Window will be frame with 2x4 with Styrofoam and wire lap
 For slabs The inside will be cover with Drywall



CITY OF FORT PIERCE

PLANNING DEPARTMENT

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



Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 317 Orange Avenue

Parcel ID #: 2410-702-0001-000-7

Type of Designation: Contributing Non-contributing Site within the _____ Historic District
 Individually Designated Site, City Commission Resolution No. _____

Property Owner / Applicant Information

Property Owner(s)

Name(s): St. Lucie Battery + Tire

Mailing Address: 5500 Orange Avenue Ft. Pierce, FL 34947

Phone Number(s): 772-337-8473 Email: dmiller@slbt.com

Applicant

Name(s): The Glass Professionals

Mailing Address: 3570 SE Dixie Hwy Stuart, FL 34997

Phone Number(s): 772-286-0459 Email: permits.glasspros@gmail.com

Representative

Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, George D Miller / SBT as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

George D Miller
Signature of Owner

10/11/16
Date

Description of Requested Work

Please indicate the type of work requested:

- Fence
- Window(s)
- Shed
- Signage
- Door(s)
- Shutter(s)
- Roof
- Porch
- Rehabilitation
- New Construction
- Demolition
- Relocation

Site Improvements (describe) _____

Other (describe) Remove and replace to match existing (impact-new)

Please provide a detailed description of the proposed work to be performed: _____

Remove and replace existing storefront double doors and fixed panels with new impact.

Have other alterations been made to the site within the last 12 months? No Yes, _____

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

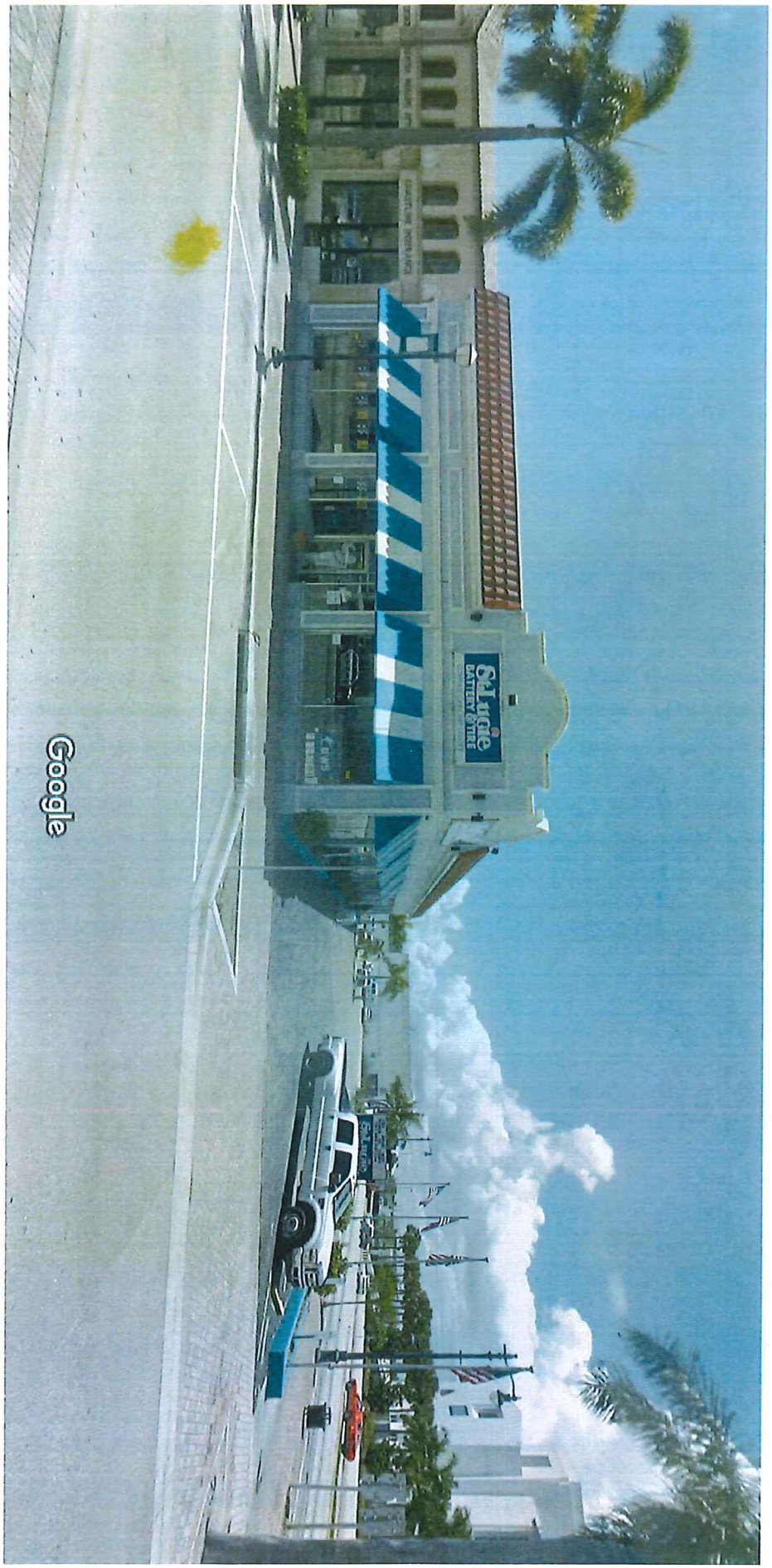
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- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.

** All openings and color will match existing **



Fort Pierce, Florida
Street View - Jun 2016



Fort Pierce, Florida

Street View - Jun 2016



CERTIFICATE OF APPROPRIATENESS
TO ALTER A DESIGNATED HISTORIC SITE

COA#16-67 HISTORIC PRESERVATION BOARD APPROVAL ADMINISTRATIVE APPROVAL

Site address 300 US Hwy 1
 Contributing Non-Contributing Individually Designated

SITE ALTERATIONS:

Request	Conditions	Applicable Standards
Remove and replace small flat roof on the electrical shed/room. Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

APPROVED:

Board Approval

Administrative Approval

Paul Samson, Chair
Historic Preservation Board

Date

Maria Lewicka, AICP
Historic Preservation Planner

10/25/16

Date

This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.

Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at mlewicka@city-ftpierce.com.

Thank you for your efforts to preserve and redevelop historic Fort Pierce through your participation in the Certificate of Appropriateness Application process. Staff looks forward to working with you in the future to preserve and rehabilitate our historic neighborhoods and structures.

Provided to:	Name/Address	Via
Owner	Orchid Island Juice Co 330 N US Highway 1 Fort Pierce, FL 34950	E-Mail ssmith@oijc.com
Applicant	Larry Neese, LLC 2801 Sunrise Blvd. Fort Pierce, FL 34982	Larry@LNRoof.com
Other	Paul Thomas, CFP Building Administrator Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail

Bldg. Permit # _____

COA# 16-67



OCT 20 2016
CITY OF FORT PIERCE
PLANNING DEPARTMENT

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

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 300 US Hwy 1 Fort Pierce
Parcel ID #: 2410-504-0001-000-9
Type of Designation: Contributing Non-contributing Site within the _____ Historic District
 Individually Designated Site, City Commission Resolution No. _____

Property Owner / Applicant Information

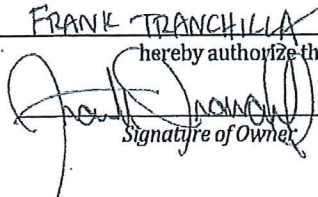
Property Owner(s)
Name(s): Orchid Island Juice Co
Mailing Address: 330 N US Highway 1
Phone Number(s): (772) 465-1122 Email: ssmith@ojc.com

Applicant
Name(s): Larry Neese, LLC
Mailing Address: 2801 Sunrise Blvd. Fort Pierce, FL 34982
Phone Number(s): 772-361-6580 Email: Larry@LNRoof.com

Representative
Name(s): _____
Mailing Address: _____
Phone Number(s): _____ Email: _____

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, FRANK TRANCHILLA as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.



Signature of Owner

10/17/16
Date

Description of Requested Work

Please indicate the type of work requested:

- | | | | |
|---|---|-------------------------------------|--|
| <input type="checkbox"/> Fence | <input type="checkbox"/> Shed | <input type="checkbox"/> Door(s) | <input checked="" type="checkbox"/> Roof |
| <input type="checkbox"/> Window(s) | <input type="checkbox"/> Signage | <input type="checkbox"/> Shutter(s) | <input type="checkbox"/> Porch |
| <hr/> | | | |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition | <input type="checkbox"/> Relocation |

Site Improvements (describe) _____

Other (describe) _____

Please provide a detailed description of the proposed work to be performed: _____

Removing and replacing small flat roof on the electrical shed/room. 360 sf

Have other alterations been made to the site within the last 12 months? No Yes, roof main building

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

Application Requirements

- \$10.00 Application fee
 - Site Plan with dimensions.
 - Architectural Drawings:
 - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
 - Drawings should indicate materials to be used.
 - Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
 - Material(s) specifications and/or sample(s)
 - Color samples.
-
- Demolition – Plans for what will be taking the demolished structure’s place should be submitted.



A

A E Backus Ave

A E Backus Ave

Natalie's Orchid
Island Juice Company



Enter



Fetch



Milli



Del. An



Subtrac



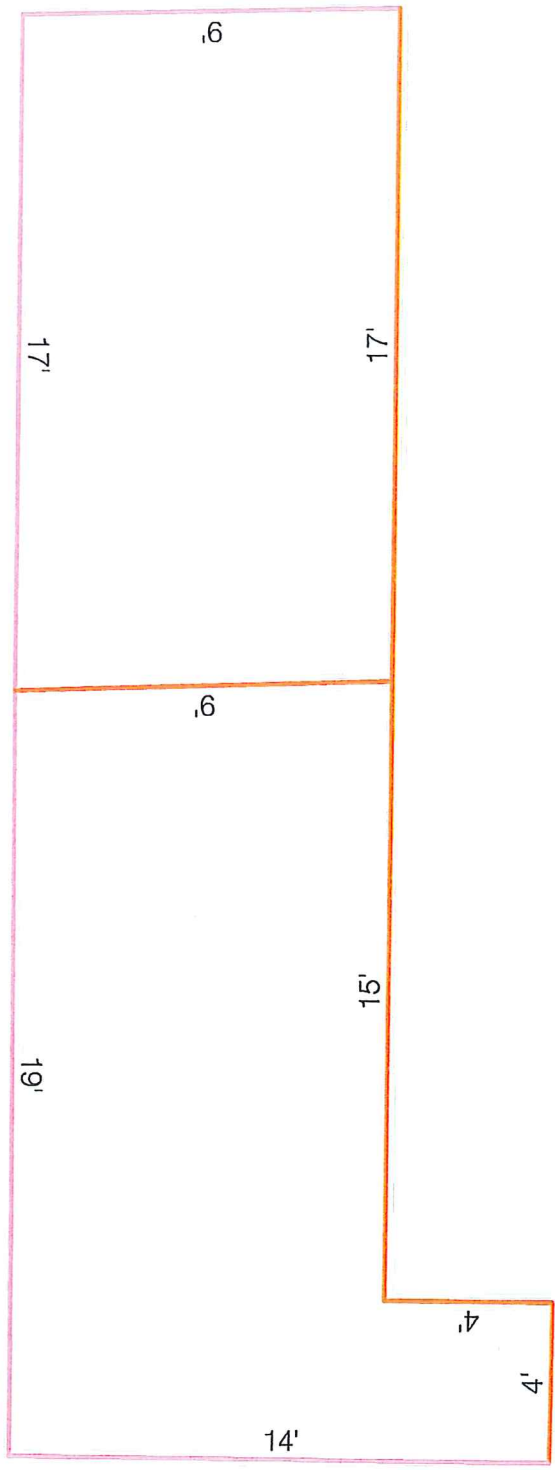
Street Vie



Measurements

330 N US Highway 1, Fort Pierce, FL, 34950

- Ridge
- Hip
- Valley
- Rake
- Eave 58' 9"
- Flashing 49' 9"
- Step Flashing



Note: all measurement are in feet

Natalies Orchid Island Juice Co #3, 330 N US Highway
1, Fort Pierce, FL, 34950



Ridge Total Area: 356 sqft Total Slopes: 2 Area 1 Pitch 1/12: 356 sqft

Hip Total Squares: 3.56 SQ

Valley Waste Factors: 3.92 SQ 10%

Rake 4.10 SQ 15%

Eave 58' 9" 4.27 SQ 18%

Flashing 49' 9" 20%

Step Flashing



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Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > [Application Detail](#)

OFFICE OF THE
SECRETARY

FL #	FL1654-R19														
Application Type	Revision														
Code Version	2014														
Application Status	Approved														
Comments	Archived														
Product Manufacturer Address/Phone/Email	POLYGLASS USA 150 Lyon Drive Fernley, NV 89408 (570) 384-1230 Ext 242 jakins@polyglass.com														
Authorized Signature	James Akins jakins@polyglass.com														
Technical Representative Address/Phone/Email	Steve Wadding 150 Lyon Drive Fernley, NV 98408 (602) 363-7139 stevew@polyglass.com														
Quality Assurance Representative Address/Phone/Email	James Akins 555 Oakridge Road Humboldt Industrial Pkwy Hazleton, PA 18201 (800) 894-4563 jakins@polyglass.com														
Category	Roofing														
Subcategory	Modified Bitumen Roof System														
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer Evaluation Report - Hardcopy Received														
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen														
Florida License	PE-59166														
Quality Assurance Entity	UL LLC														
Quality Assurance Contract Expiration Date	10/06/2018														
Validated By	John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received														
Certificate of Independence	FL1654 R19 COI 2016 01 COI Nieminen.pdf														
Referenced Standard and Year (of Standard)	<table> <thead> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr> <td>ASTM D6162</td> <td>2000</td> </tr> <tr> <td>ASTM D6163</td> <td>2000</td> </tr> <tr> <td>ASTM D6164</td> <td>2005</td> </tr> <tr> <td>ASTM D6222</td> <td>2008</td> </tr> <tr> <td>ASTM D6509</td> <td>2009</td> </tr> <tr> <td>FM 4470</td> <td>1992</td> </tr> </tbody> </table>	<u>Standard</u>	<u>Year</u>	ASTM D6162	2000	ASTM D6163	2000	ASTM D6164	2005	ASTM D6222	2008	ASTM D6509	2009	FM 4470	1992
<u>Standard</u>	<u>Year</u>														
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ASTM D6163	2000														
ASTM D6164	2005														
ASTM D6222	2008														
ASTM D6509	2009														
FM 4470	1992														

Equivalence of Product Standards Certified By

Sections from the Code

Product Approval Method Method 1 Option D

Date Submitted 04/18/2016

Date Validated 04/19/2016

Date Pending FBC Approval 04/20/2016

Date Approved 06/08/2016

Summary of Products

FL #	Model, Number or Name	Description
1654.1	Polyglass SBS and APP Modified Bitumen Roof Systems	SBS and APP modified bitumen roof systems
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-622.5 Other: 1.) The design pressure in this application relates to one particular assembly over concrete deck. Refer to the ER Appendix for other systems and deck types. 2.) Refer to ER, Section 5 for other Limits of Use.		Installation Instructions FL1654 R19 II 2016 04 FINAL A1 ER POLYGLASS MODBIT FL1654-R19.pdf Verified By: Robert Nieminen PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL1654 R19 AE 2016 04 FINAL ER POLYGLASS MODBIT FL1654-R19.pdf Created by Independent Third Party: Yes

[Back](#) [Next](#)

Contact Us :: [2601 Blair Stone Road, Tallahassee FL 32399](#) Phone: 850-487-1824

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Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:



Credit Card
Safe





**CERTIFICATE OF APPROPRIATENESS
 TO ALTER A DESIGNATED HISTORIC SITE**

COA#16-68 HISTORIC PRESERVATION BOARD APPROVAL ADMINISTRATIVE APPROVAL

Site address 201 S 2nd Street, Suite 206

Contributing Non-Contributing Individually Designated

SITE ALTERATIONS:

Request	Conditions	Applicable Standards
Placement of 3' x 14'-10" (44.5 Sq. Ft.) exterior wall sign for "Cole Coppola Law Building". Please see attached drawing.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

APPROVED:

Board Approval

Administrative Approval

 Paul Samson, Chair Date
 Historic Preservation Board


 _____ 10/28/16
 Maria Lewicka, AICP Date
 Historic Preservation Planner

This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.

Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at mlewicka@city-ftpierce.com.

Thank you for your efforts to preserve and redevelop historic Fort Pierce through your participation in the Certificate of Appropriateness Application process. Staff looks forward to working with you in the future to preserve and rehabilitate our historic neighborhoods and structures.

Provided to:	Name/Address	Via
Owner	Kraaz & Kraaz Finance LLC 201 S 2nd Street Ste 206 Fort Pierce, FL 34959	
Applicant	Hans Kraaz 201 S 2nd Street Fort Pierce, FL 34950	Phone 772-370-4777
Representative	Glomaster Sign Co. Inc. 3311 25 th Industrial St. Fort Pierce, FL 34946	Phone 772-464-0718
Other	Marc Meyers, CFP Building Official Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



THE SUNRISE CITY
FORT PIERCE
PLANNING DEPARTMENT
Florida



COA# 16-68

Bldg. Permit # _____

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: _____

201 S. 2nd St. Suite 206

Parcel ID #: _____

2410-886 0 008-0 01-5

Type of Designation:

Contributing Non-contributing Site within the _____ Historic District

Individually Designated Site, City Commission Resolution No. _____

Property Owner/ Applicant Information

Property Owner(s)

Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

Applicant

Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

Representative

Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, _____ as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Signature of Owner

Date

APPLICANT

Name(s): Hans Kraay
Mailing Address: 201 S. 2nd St.
St. Pierce, Fl. 34950
Phone Number(s): 772-370-4777

ARCHITECT

Name(s): _____
Mailing Address: _____
Phone Number(s): _____

ENGINEER

Name(s): Christian Langley
Mailing Address: 1200 N. Federal Hwy, #200
Boca Raton, Fl. 33432
Phone Number(s): 1-888-371-3113

CONTRACTOR

Name(s): Glomaster Sign Co. Inc. ✓
Mailing Address: 3311 Industrial 25th St.
St. Pierce, Fl. 34946
Phone Number(s): 772-464-0718

Authorization: The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I, Hans Kraay, as Owner of Lot(s) 12413, Block(s) _____,
(First name of owner(s))
Subdivision PP Cobble Addition do hereby authorize the filing of this application on my behalf.
Signature of Owner [Signature] Date 10/18/14

10 x 14" LENGTH BUILDING NAME NON-ILLUMINATED INJECTION MOLDED LETTERS
 FONT TIMES BOLD COLOR METALLIC GOLD

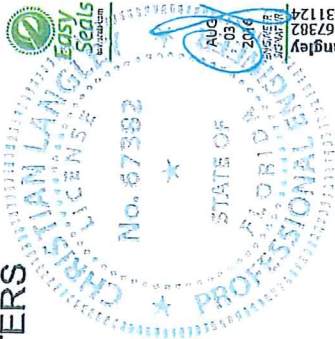


*Subject to find
 address*

32'



1200 N Federal Hwy #200
 Boca Raton, FL 33432
 1-888-371-3113
 Christian Langley
 Florida PE #67382
 Cert of Auth #31124



ANCHOR SCHEDULE	WALL MATERIAL	ANCHOR TYPE	QTY or SPACING
	CONCRETE (B&G) or HOLLOW MASONRY	1/4" TREADED RODS WITH MIN 2" EMBED IN ADHESIVE	MIN (3) PER LETTER
		1/4" TAPCONS (OR EQUIV) WITH 1.75" EMBED	MIN (3) PER LETTER
		1/4" EXPANSION ANCHORS WITH 2.5" EMBED	MIN (3) PER LETTER
	1/2" PLYWOOD (NO ACCESS BEHIND)	1/4" TOGGLE BOLTS	MIN (3) PER LETTER
	METAL STUDS / PANELS	1/4" WOOD SCREWS OR TAPCONS, FULL EMBED	MIN (3) PER LETTER
	HOLLOW WALL + BLOCKING	#14 METAL SCREWS TO MIN 18ga STEEL OR 0.090" ALUM	MIN (3) PER LETTER
		1/4" THRU BOLTS OR LAGS TO SOLID BLOCKING BEHIND	MIN (3) PER LETTER

ASCE 2-10 WIND LOADS:
 • V=160 mph - Exposure C
 • Risk Category 2 Structure
 • Sign Height = 30 ft max
 • ASD Load Coeff = 0.6
 • Zone 4: ± 36.1 psf
 • Zone 5: ± 46.0 psf
 Wall components & cladding:
 • I=1.0, Kd=0.85, G=0.85
 • Sign Height = 30 ft max
 • ASD Load Coeff = 0.6

General Notes:
 • Design is in accordance with the requirements of the Fla Bldg Code 5th Ed (2014) for use within & outside the High Velocity Hurricane Zone (HVHZ).
 • This engineering certifies only the structural integrity of those systems, components, and/or other construction explicitly specified herein.
 • Electrical notes, details, & specifications are provided by and are the sole responsibility of the electrical contractor. No electrical review has been performed and no certification of such is intended.
 • Aluminum extrusions shall be 6063-T6, unless noted otherwise.

04/07/2016

Bldg. Permit # _____

COA# 16-69



CITY OF FORT PIERCE

PLANNING DEPARTMENT

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

OCT 31 2016

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 116 N 2nd St Fort Pierce Fl 34950

Parcel ID #: _____

Type of Designation: Contributing Non-contributing Site within the _____ Historic District

Individually Designated Site, City Commission Resolution No. _____

Property Owner / Applicant Information

Property Owner(s) Name(s): RFMD Investments LLC.

Mailing Address: 116 N 2nd St Fort Pierce Fl 34950

Phone Number(s): 772-577-4145 Email: rfmdinvestments@aol.com

Applicant Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

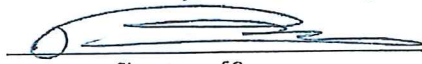
Representative Name(s): Michael J. Waldrop

Mailing Address: P.O. Box 12757 Ft. Pierce, Fl 34979

Phone Number(s): 772- 519-9108 Email: MWaldrop@innovationcontracting.co

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, RFMD Investments, LLC as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.


Signature of Owner

7/29/2016
Date

11360

Description of Requested Work

Please indicate the type of work requested:

- Fence Shed Door(s) Roof
- Window(s) Signage Shutter(s) Porch

- Rehabilitation New Construction Demolition Relocation

Site Improvements (describe) _____

Other (describe) REMOVE & INSTALL RAIL @ REAR LOADING DOCK

Please provide a detailed description of the proposed work to be performed: REMOVE EXISTIN HAND RAIL AT STEPS, INSTALL NEW CODE COMPLIANT ALUM RAIL

Have other alterations been made to the site within the last 12 months? No Yes, _____

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

Application Requirements

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
 - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
 - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.

- Demolition - Plans for what will be taking the demolished structure's place should be submitted.

REVISIONS 09/19/2016

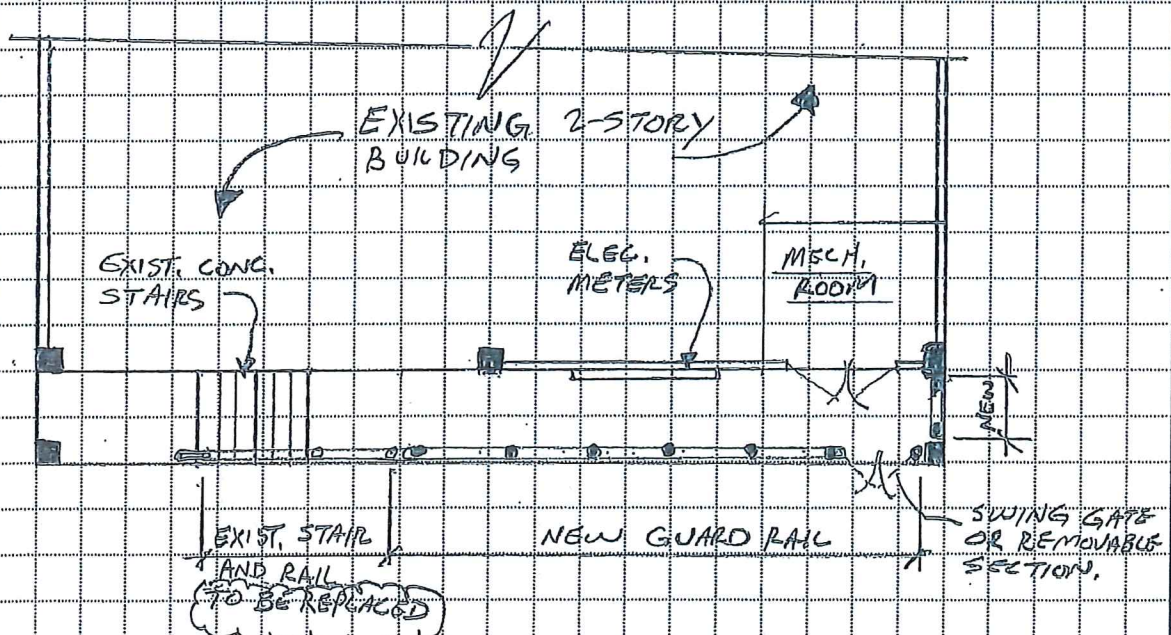
JEFFREY D. MCGEE, PE 45944
Structural Engineer
419 South Hampton Club Way
St. Augustine, FL 32092
Phone (904)325-4190
engmcgee@gmail.com

Jeffrey D. McGee
9/19/2016

JOB SUBWAY GUARD RAIL
SHEET NO. ONE OF TWO
CALCULATED BY JDM DATE 7/15/16
~~CHECKED BY~~ REVISED DATE 9/19/16
SUBJECT 116 N. 2ND ST.
FORT PIERCE, FL

NOTES:

- 1 DESIGN PER FBC 5TH EDITION, 2014.
- 1013.1 GUARD HEIGHT NOT LESS THAN 42 INCHES ABOVE WALK SURFACE.
- 1013.4 GUARDS SHALL PREVENT PASSAGE OF 4' DIAMETER SPHERE.
EXCEPTION 2: AT TRIANGULAR OPENINGS AT THE SIDES OF STAIRS FORMED BY RISER, RAIL SHALL PREVENT PASSAGE OF 6" DIAMETER SPHERE
- 1607.8.1 GUARDS DESIGNED FOR LOAD OF 50 PLF AT TO RAIL HEIGHT OF GUARD - SECTION 4.5.1 ASCE 7-10
- 1607.8.1.1 CONCENTRATED LOAD OF 200 LBS. AT ANY POINT - SECTION 4.5.1 ASCE 7-10



PARTIAL GROUND LEVEL PLAN

N.T.S.

NORTH

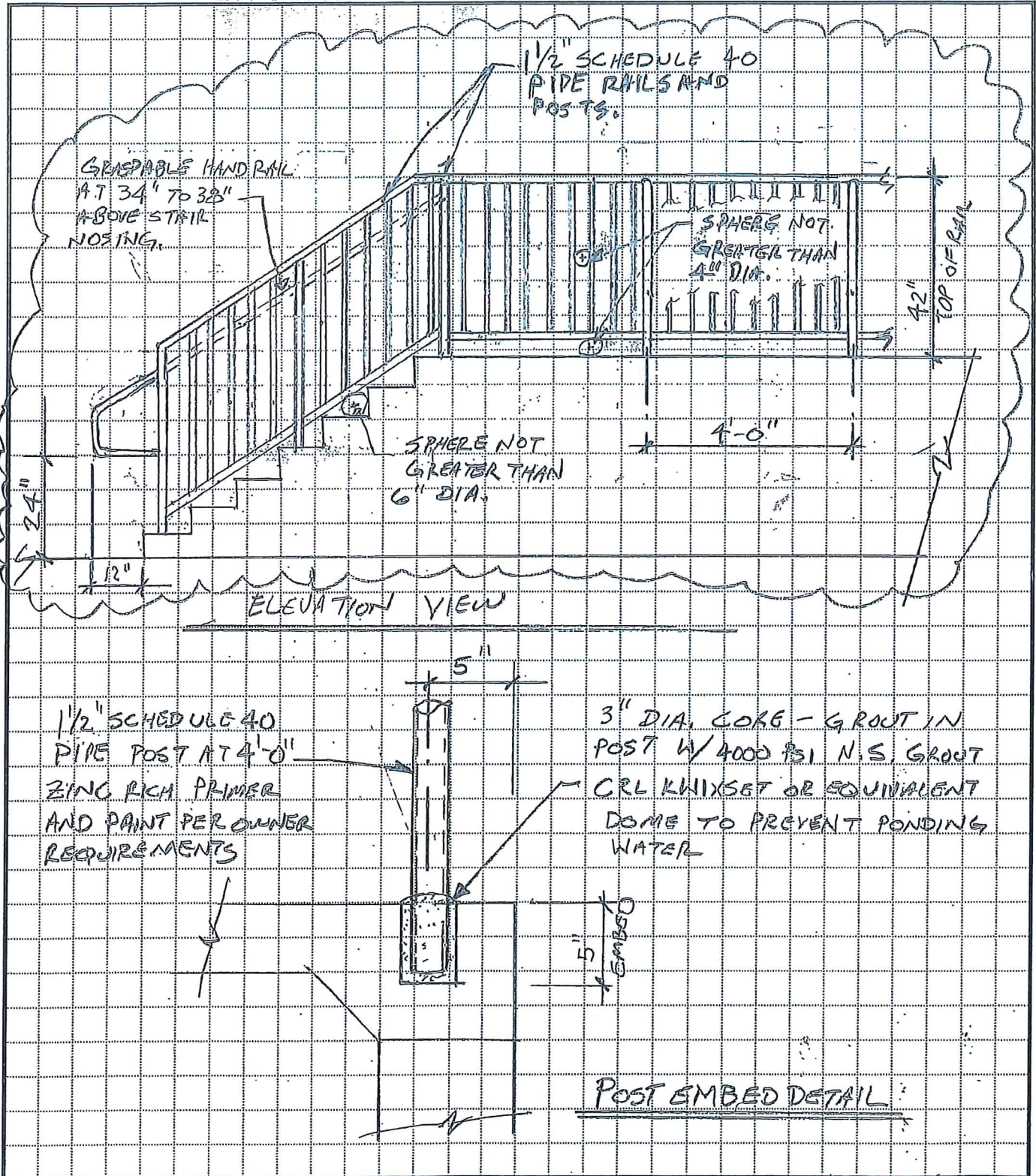
REVISIONS 09/19/2016

JOB SUBWAY GUARD RAIL

JEFFREY D. MCGEE, PE 45944
Structural Engineer
419 South Hampton Club Way
St. Augustine, FL 32092
Phone (904)325-4190
engmcgee@gmail.com

Jeffrey D. McGee
9/19/2016

SHEET NO. TWO OF TWO
CALCULATED BY JDM DATE 7/15/16
~~CHECKED BY~~ REVISED DATE 9/19/16
SUBJECT 116 N. 2ND ST.
FORT PIERCE, FL





CERTIFICATE OF APPROPRIATENESS
 TO ALTER A DESIGNATED HISTORIC SITE

COA#16-70 HISTORIC PRESERVATION BOARD APPROVAL ADMINISTRATIVE APPROVAL

Site address 808 Delaware Avenue
 Contributing Non-Contributing Individually Designated

SITE ALTERATIONS:

Request	Conditions	Applicable Standards
Remove and replace damage siding below window sills on east and west side of the building. Please see attached drawing.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

APPROVED:

Board Approval

Administrative Approval

 Paul Samson, Chair Date
 Historic Preservation Board

_____ 11/01/16
 Maria Lewicka, MCP Date
 Historic Preservation Planner

This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.

Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at mlewicka@city-ftpierce.com.

Thank you for your efforts to preserve and redevelop historic Fort Pierce through your participation in the Certificate of Appropriateness Application process. Staff looks forward to working with you in the future to preserve and rehabilitate our historic neighborhoods and structures.

Provided to:	Name/Address	Via
Owner	Glenn Stallings Benito Permuy 2363 SW Valnera St Port St Lucie, FL 34953	
Applicant	Earl Gaines 5821 Starcher Ave Fort Pierce, FL 34947	E-Mail erlgaines@comcast.net
Other	Marc Meyers, CFP Building Official Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



THE SUNRISE CITY
FORT PIERCE
PLANNING DEPARTMENT
Florida

Bldg. Permit # _____

OCT 31 2016

COA# 16-70

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 808 DELAWARE AVE

Parcel ID #: 2410-707-0008-000-1

Type of Designation: Contributing Non-contributing Site within the _____ Historic District

Individually Designated Site, City Commission Resolution No. _____

Property Owner/ Applicant Information

Property Owner(s) Name(s): GLENN STALLINGS

Mailing Address: 2363 SW VALVERA ST

Phone Number(s): 772-370-4264 Email: _____

Applicant Name(s): EARL GAINES

Mailing Address: 5821 STARCHER AVE FT. PIERCE FL 34947

Phone Number(s): 772-577-0826 Email: ERLGAINES@COMCAST.NET

Representative Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

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 Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, BENITA M PERMOY as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]
Signature of Wendy Pierre
MY COMMISSION # FF095833
EXPIRES: February 25, 2018
Bonded Thru Notary Public Underwriters

October 31, 2016
Date

Wendy Pierre 10.31.16

Description of Requested Work

Please indicate the type of work requested:

- Fence
- Shed
- Door(s)
- Roof
- Window(s)
- Signage
- Shutter(s)
- Porch

- Rehabilitation
- New Construction
- Demolition
- Relocation

Site Improvements (describe) R/R DAMAGE SIDING ON EAST AND WEST

Other (describe) _____

Please provide a detailed description of the proposed work to be performed: SEE ATTACHED SHEET

R/R DAMAGE SIDING BELOW WINDOW SILLS
ON EAST AND WEST SIDE OF BUILDING

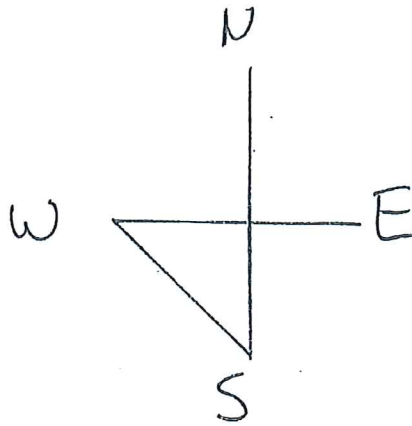
Have other alterations been made to the site within the last 12 months? No Yes, _____

Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

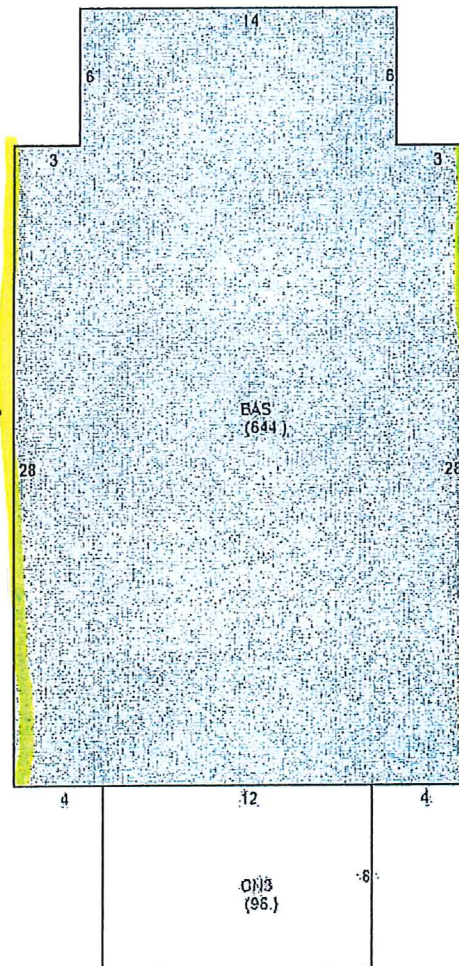
Application Requirements

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
 - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
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- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.

Glen Stallings
Benito M Permuy
2363 SW Valnera St.
P. S. L. FL. 34953



REMOVE & REPLACE
SIDING BOARDS FROM
WINDOW SILL
DOWN →



← REMOVE & REPLACE
SIDING BOARDS
FROM WINDOW SILL
DOWN

APPROXIMATELY 2.00 SQFT.





