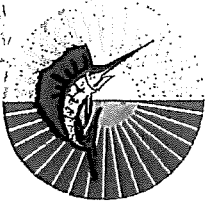


16-0537



THE SUNRISE CITY  
**FORT PIERCE**  
CODE ENFORCEMENT  
*Florida*

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

Date:	10-23-2018		
Property address:	427 North 12th Street Rear		
Owner(s) of record:	South East Builders Group Inc		
Mailing address:	152 SW Pilsner Cir Port St Lucie, FL 34953		
Property tax ID #:	2409-561-0267-0101		
Original purchase date:	<del>3/10/06</del> 7/12/18	Original purchase price:	34,000 <sup>00</sup>
Property is used for:	<input type="checkbox"/> Single Family	<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Vacant Lot
Name of person requesting reduction:	Paul Desir	Relationship to owner(s)	owner owner
Telephone #:	561 201-8924	Mobile phone #:	561 201-8924
E-mail:	Desir2collection2@	Preferred contact method:	call or text
What are owner(s) intentions for property:	Hold and Keep		
Are there current code violations?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Explain: (please attached notice)
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


\$ 69,240

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ ~~1,000~~ 68,240

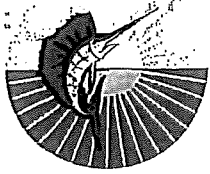
DOLLAR AMOUNT I AGREE TO PAY

\$ 4,000<sup>00</sup>

  
Signature of Owner or Representative

10/23/2018  
Date

Paul Desir  
Printed Name



THE SUNRISE CITY  
**FORT PIERCE**  
CODE ENFORCEMENT  
*Florida*

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 the appropriate application for lien reduction / rescindment.
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 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 are governed by Rule 17 of the City's Rules & Regulation for Code Enforcement Board and Special Magistrate.

Property Address: 427 North 12th Street Rear  
Property Owner: South East Builders group inc, Paul Desid  
Mailing Address: 152 SW Pilsner Cir Port St Lucie Fl 34953  
Telephone #: 561 201 8924 Cell Phone #: 561 201-8924  
E-Mail Address: Desire Collection 20@gmail.com

Is the property in compliance? yes If no, please explain in the narrative of your request.

I, Paul Desir, 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 bought the property without doing a lien check

Date: 10-23-2018

Signed: *Paul Desir*

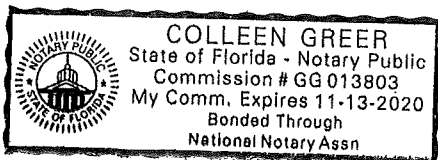
Print Name: Paul Desir

STATE OF FLORIDA

COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority Paul E Desir who acknowledged before me that the information contained herein is true and correct. He or She is is not personally known to me and has produced Fl. Driver's license as identification.

SWORN TO AND SUBSCRIBED before me this 23rd day of October, 2018.



*Colleen Greer*  
Notary Public, State of Florida

OWNER / REPRESENTATIVE REQUEST TO PROCESS APPLICATION


Property Address: 427 North 12th Street Near Fort Pierce

I acknowledge that I have been provided a copy of Rule 17 of the Rules of Procedure for the City of Fort Pierce Code Enforcement Board and Special Magistrates and that I have read the rules and being advised as such make the following request:

I am requesting that my application for lien reduction be processed administratively through the Rules of Procedure Sec. 17(b), I understand the requirements to be met and that I waive my right to a hearing before either the Special Magistrate or Code Enforcement Board.

I am requesting that my application for lien reduction be processed through the Rules of Procedure Sec. 17(c), I understand the requirements to be met and that my request will be heard and determination made by either the Special Magistrate or Code Enforcement Board that authorized Order Assessing Fine and Imposing Lien.


I am requesting that my application for lien reduction be processed through the Rules of Procedure Sec. 17(e) and that my request will be heard and determination made by the City Commission of the City of Fort Pierce.

      10-23-2018      PAUL DESIR  
Signature of Owner or Representative      Date      Printed Name

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COFF – APPLICATION PROCESS DETERMINATION

Staff has reviewed the request for lien reduction and agrees to process the application as requested by the signing party.

Staff has reviewed the request for lien reduction and do not agree to process the application as requested by the signing party. The matter will be placed before either the Special Magistrate or Code Enforcement Board that authorized the Order Assessing Fine and Imposing Lien.

      10/23/18      MARGARET M ARRAIZ  
City Representative      Date      Printed Name