

## **Administrative Certificates of Appropriateness**

Attached are Certificates of Appropriateness issued administratively in January 2018.

- COA #18-01, 658 N 2<sup>nd</sup> Street – New sign
- COA #18-02, 421 N 10<sup>th</sup> Street – Windows and doors replacement
- COA #18-03, 200 S Indian River Drive - Signage
- COA #18-04, 510 N 8<sup>th</sup> Street – Sidewalk cover
- COA #18-06, 411 N 2<sup>nd</sup> Street – Condensing unit
- COA #18-07, 716 S 10<sup>th</sup> Street – Door replacement
- COA #18-05, 826 Atlantic Avenue – Roof replacement
- COA # 18-08, 907 Citrus Avenue – Doors replacement
- COA #18-09, 725 Avenue D – Roof replacement
- COA #18-11, 100 Avenue A – Exterior renovations



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

COA#18-01     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 658 N 2<sup>nd</sup> Street

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
New sign. Individual, flat cut PVC letters and logo mounted to existing wood entry way.  Please see attached		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

  
\_\_\_\_\_  
Maria Lewicka, AICP                      01/03/18  
Historic Preservation Planner                      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](mailto: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	Trevor G. Horvath 2301 River Hammock Ln Fort Pierce, FL 34981	E-Mail
Applicant	Robert Galak, Flamingo Signs 4444 S.E. Commerce Ave Stuart, FL 34997	E-Mail flamingosigns@aol.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# 18-01



# 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: 658 N 2ND ST. FT. PIERCE  
Parcel ID #: 2403-801-0006-000-4  
Type of Designation:  Contributing  Non-contributing Site within the 3262 Town Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

#### Property Owner/ Applicant Information

Property Owner(s)  
Name(s): ~~TREVOR G. HORVATH~~ Trevor Horvath  
Mailing Address: 2301 RIVER HAMMOCK LN FT. PIERCE 34981  
Phone Number(s): 561-252-7641 Email: \_\_\_\_\_

Applicant  
Name(s): ROBERT GRALAK FLAMINGOS  
Mailing Address: 4444 SE COMMERCIAL AVE SUITE FL. 34997  
Phone Number(s): 772-220-7377 Email: FLAMINGOS@AOL.COM

Representative  
Name(s): ROBERT GRALAK  
Mailing Address: 4444 SE COMMERCIAL AVE SUITE FL. 34997  
Phone Number(s): 772-220-7377 Email: FLAMINGOS@AOL

*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, Trevor G. Horvath as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Trevor Horvath  
Signature of Owner

12/27/17  
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) NEW SIGN

Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: INSTALL INDIVIDUAL PVC LETTERS TO EXISTING WOOD ENTRANCE WAY, 200TH ENTRANCE.

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.



SIGN

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4444 S.E. COMMERCE AVE.  
STUART, FL. 34997  
772.220.7768  
flamingosigns@aol.com



- APPROVED
- APPROVED W/ CHANGES
- NOT APPROVED
- RESUBMIT W/ CHANGES

JOB TITLE TFSY TIKI ADDRESS FT PIERCE  
NOTE: ALL ARTWORK & COLORS MUST BE SIGNED OFF BEFORE ANY WORK IS TO BEGIN  
IF EXACT COLORS ARE REQUIRED OR MORE DETAILS PLEASE NOTE. CUSTOMER IS RESPONSIBLE FOR ANY CHANGES ONCE WORK BEGINS.

INDIVIDUAL FLAT CUT PVC LETTERS MOUNTED TO EXISTING ENTRY WAY

144 in



28 in

28 S.F.



1/2" PVC LETTERS AND  
LOGO GLUED TO FACE  
WITH SILICONE ADHESIVE  
OF EXISTING PANEL  
ACROSS ENTRY



JOB TITLE TIPSY TIKI

ADDRESS FT PIERCE

NOTE: ALL ARTWORK & COLORS MUST BE SIGNED OFF BEFORE ANY WORK IS TO BEGIN  
IF EXACT COLORS ARE REQUIRED OR MORE DETAILS PLEASE NOTE. CUSTOMER IS  
RESPONSIBLE FOR ANY CHANGES ONCE WORK BEGINS.

- APPROVED
- APPROVED W/ CHANGES
- NOT APPROVED
- RESUBMIT W/ CHANGES



4444 S.E. COMMERCE AVE.  
STUART, FL 34997  
772.220.7768  
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Bldg. Permit # 17-00003768

COA# 18-02

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 421 N 10th St. Ft. Pierce, FL  
Parcel ID #: 2409-501-0192-0001  
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): Patricia Dellepore, Trustee  
Mailing Address: 1861 Banks Rd Margate, FL 33063  
Phone Number(s): 954-482-2218 Email: Patricia.dellepore@degrouppl.com

Applicant  
Name(s): Patricia Dellepore, Trustee  
Mailing Address: 1861 Banks Rd. Margate, FL 33063  
Phone Number(s): 954-482-2218 Email: Patricia.dellepore@degrouppl.com

Representative  
Name(s): SAME  
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, Patricia Dellepore as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

01/03/18  
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) \_\_\_\_\_

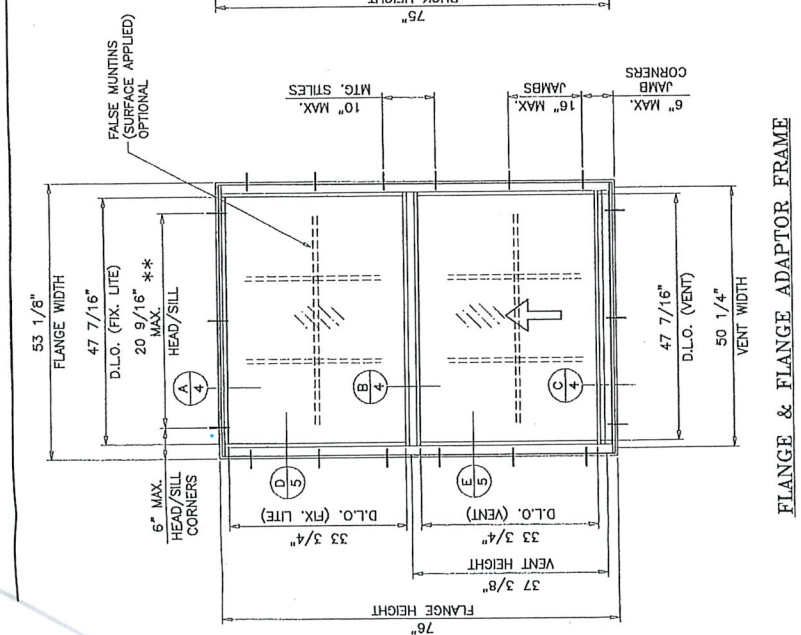
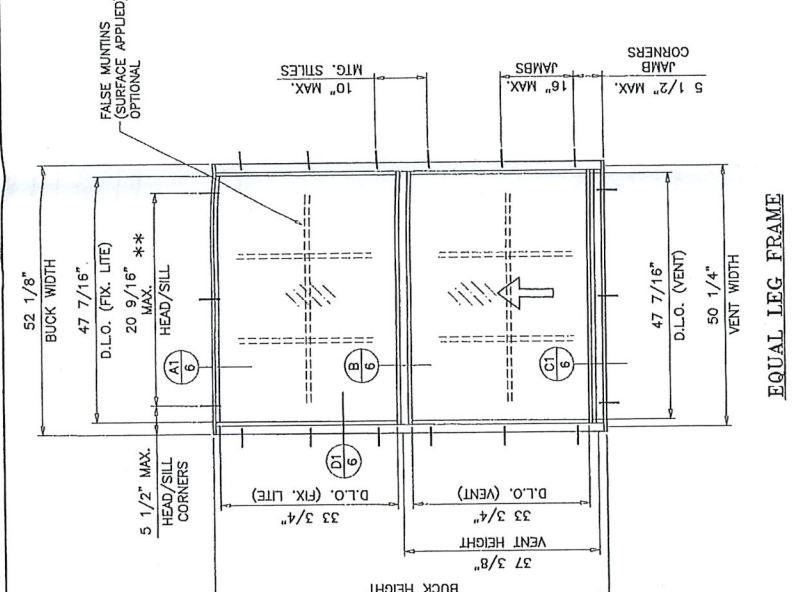
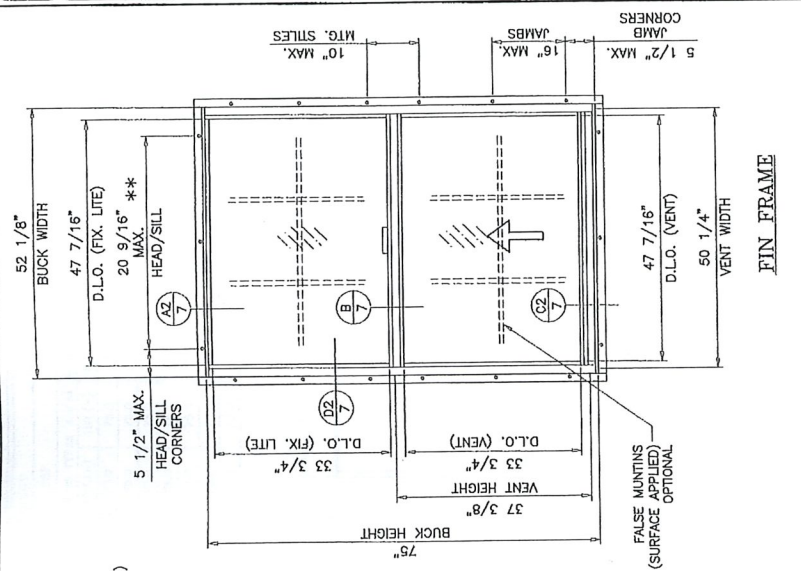
Please provide a detailed description of the proposed work to be performed: Remove existing exterior doors and windows and replace with impact resistant doors and windows as indicated on Plans.

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.



**LAMINATED GLASS INSULATING LAM. GLASS LARGE MISSILE IMPACT SMALL MISSILE IMPACT**

PRODUCT REVISED as complying with the Florida Building Code Acceptance No. 15-0512.10 Expiration Date **SEPT. 22, 2020**  
 By *Mohamed J. Jilil* Miami Dade Product Center

Engr: JAWAD AHMAD  
 CIVIL 70592  
 F.L.A. P.E. 3538  
 Jilil 3/18/2015

**\* \* \***  
 CENTER ANCHOR REQUIRED WHEN SPACING EXCEEDS 20 9/16"

**SERIES SENTINEL 110 ALUMINUM SINGLE HUNG WINDOW**

DESIGN LOAD RATINGS FOR THESE WINDOWS TO BE AS PER CHARTS SHOWN ON SHEET 2.

APPROVAL APPLIES TO SINGLE UNITS OR SIDE BY SIDE COMBINATIONS OF S.H./S.H. OR SINGLE HUNG WDW. WITH OTHER MIAMI-DADE COUNTY APPROVED WINDOWS USING MIAMI-DADE COUNTY APPROVED MULLIONS IN BETWEEN.

LOWER DESIGN PRESSURE FROM WINDOWS OR MULLION APPROVAL WILL APPLY TO ENTIRE SYSTEM.

THIS PRODUCT HAS BEEN DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE INCLUDING HIGH VELOCITY HURRICANE ZONE (HVHZ).

WOOD BUCKS BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.

ANCHORS SHALL BE AS LISTED, SPACED AS SHOWN ON DETAILS, ANCHORS EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO. ANCHORING OR LOADING CONDITIONS NOT SHOWN IN THESE DETAILS ARE NOT PART OF THIS APPROVAL.

A LOAD DURATION INCREASE IS USED IN DESIGN OF ANCHORS INTO WOOD ONLY. MATERIALS INCLUDING BUT NOT LIMITED TO STEEL/METAL SCREWS, THAT COME INTO CONTACT WITH OTHER DISSIMILAR MATERIALS SHALL MEET THE REQUIREMENTS OF THE FLORIDA BUILDING CODE.

# JELD-WEN® Steel

STEEL STEEL EDGE DOOR  
6'-8" & 8'-0" SINGLE OUTSWING OPAQUE IMPACT DOOR

### GENERAL NOTES

- THIS PRODUCT IS DESIGNED TO COMPLY WITH THE FLORIDA CURRENT BUILDING CODE INCLUDING "HIGH VELOCITY HURRICANE ZONE" (HVHZ) REQUIREMENTS.
- WOOD BUCKS, BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.
- PRODUCT ANCHORS SHALL BE AS LISTED AND SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
- IMPACT RESISTANT SHUTTERS NOT REQUIRED.
- DESIGN PRESSURE RATING SHALL BE AS FOLLOWS:  
- FOR 6'-8" WOOD FRAMES - SEE TABLE SHEET 1  
- FOR 8'-0" WOOD FRAMES - SEE TABLE SHEET 1
- THIS SYSTEM WAS TESTED FOR 2.86 LBS. WATER PRESSURE AS PER ASTM-E331.
- SEE DESIGN PRESSURE TABLE & NOTES BELOW REGARDING WATER INFILTRATION REQUIREMENTS.

### OUTSWING IMPACT STEEL EDGE DOOR

(Comment to all frame conditions)  
DOOR LEAF CONSTRUCTION:

Face sheets: 24 ga. (0.020") minimum thickness, Galvanized Steel A-525 commercial quality - AKDQ per ASTM 620 with minimum average yield strength  $F_y=26,240$  psi.  
Core design: Expanded polystyrene with 1.0 to 1.25 lbs. density, by JELD-WEN.

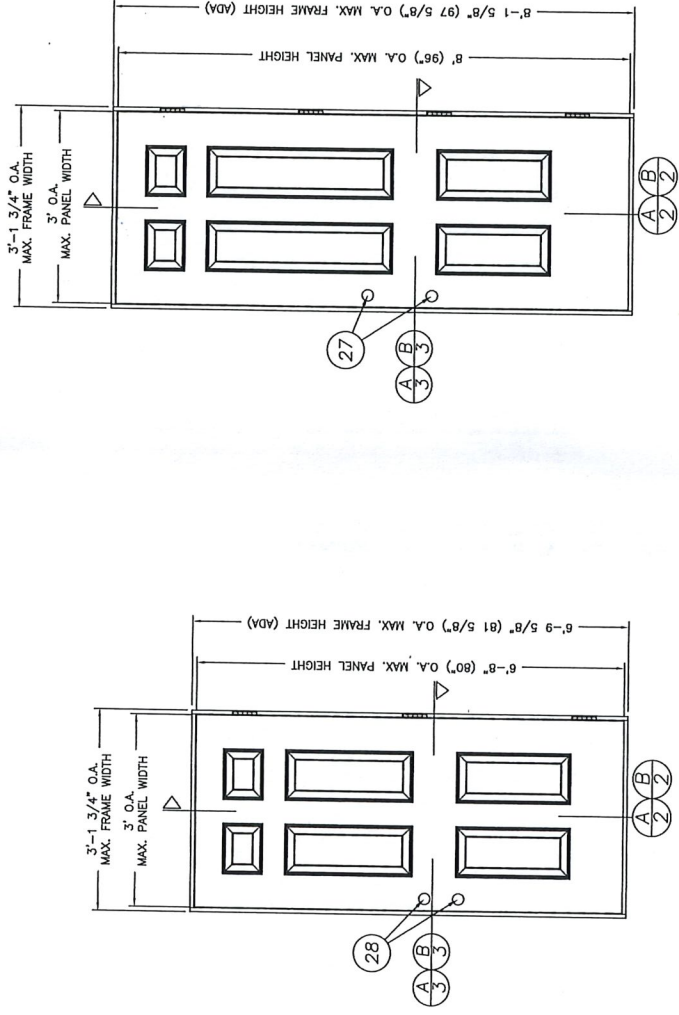
Panel Construction: Steel face sheets glued to expanded polystyrene (EPS), with steel top and bottom rolls and steel stiles with a wood lock block reinforcement. The hinge stile contains a MDF board for added hinge support.

Frame Construction (Both Frame Types): The head jamba and side jamba are mortised, butted and joined using (3) 7/8" x 2" wire staples. A bumper threshold OUTSWING threshold was utilized at the sill. An optional aluminum ADA threshold is available.

### TABLE OF CONTENTS

SHT #	DESCRIPTION
1	TYPICAL ELEVATIONS & GENERAL NOTES
2	VERTICAL CROSS SECTIONS & BOM
3	HORIZONTAL CROSS SECTIONS
4	ANCHORING LOCATIONS & DETAILS
5	UNIT COMPONENTS

NOTE: USE OF ITEM (1) MEETS WATER INFILTRATION REQUIREMENTS UP TO A DESIGN PRESSURE OF +70 PSF (UNLESS VALUES IN DESIGN PRESSURE TABLE TO RIGHT GOVERN)



6'-8" SINGLE OUTSWING UNIT (X)  
SCALE: 1/2" = 1'-0"

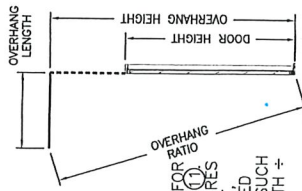
8'-0" SINGLE OUTSWING UNIT (X)  
SCALE: 1/2" = 1'-0"

ALL DOOR MODELS ARE VIEWED FROM THE EXTERIOR SIDE

DESIGN PRESSURE RATING	WHERE WATER INFILTRATION REQUIREMENT IS NEEDED	
	WHERE WATER INFILTRATION REQUIREMENT IS NEEDED	WHERE WATER INFILTRATION REQUIREMENT IS NOT NEEDED
6'8" (X)	+70.0psf	+80.0psf
8'0" (X)	+61.0psf	+61.0psf
		-80.0psf
		-65.0psf

Digitally signed by Hermes F. Norero, P.E.  
Reason: I am approving this document  
Date: 2015.04.10 09:09:59 -0400'

\*NOTE: PRODUCT HAS NOT BEEN RATED FOR WATER INFILTRATION UNLESS USING ITEM (1) IF AUTHORITY HAVING JURISDICTION REQUIRES THAT PRODUCT MEETS THIS REQUIREMENT. PRODUCT SHALL BE USED WHEN INSTALLED AT LOCATION PROVIDED BY OVERHANG SUCH THAT OVERHANG FOR RATIO = OH LENGTH + OH HEIGHT.



HERMES F. NORERO  
FLORIDA P.E. NO. 73778

BUILDING DROPS, INC.  
396 EAST DANIA BEACH BLVD.  
DANIA BEACH, FL 33004  
FBPE Certificate of Registration No. 28578

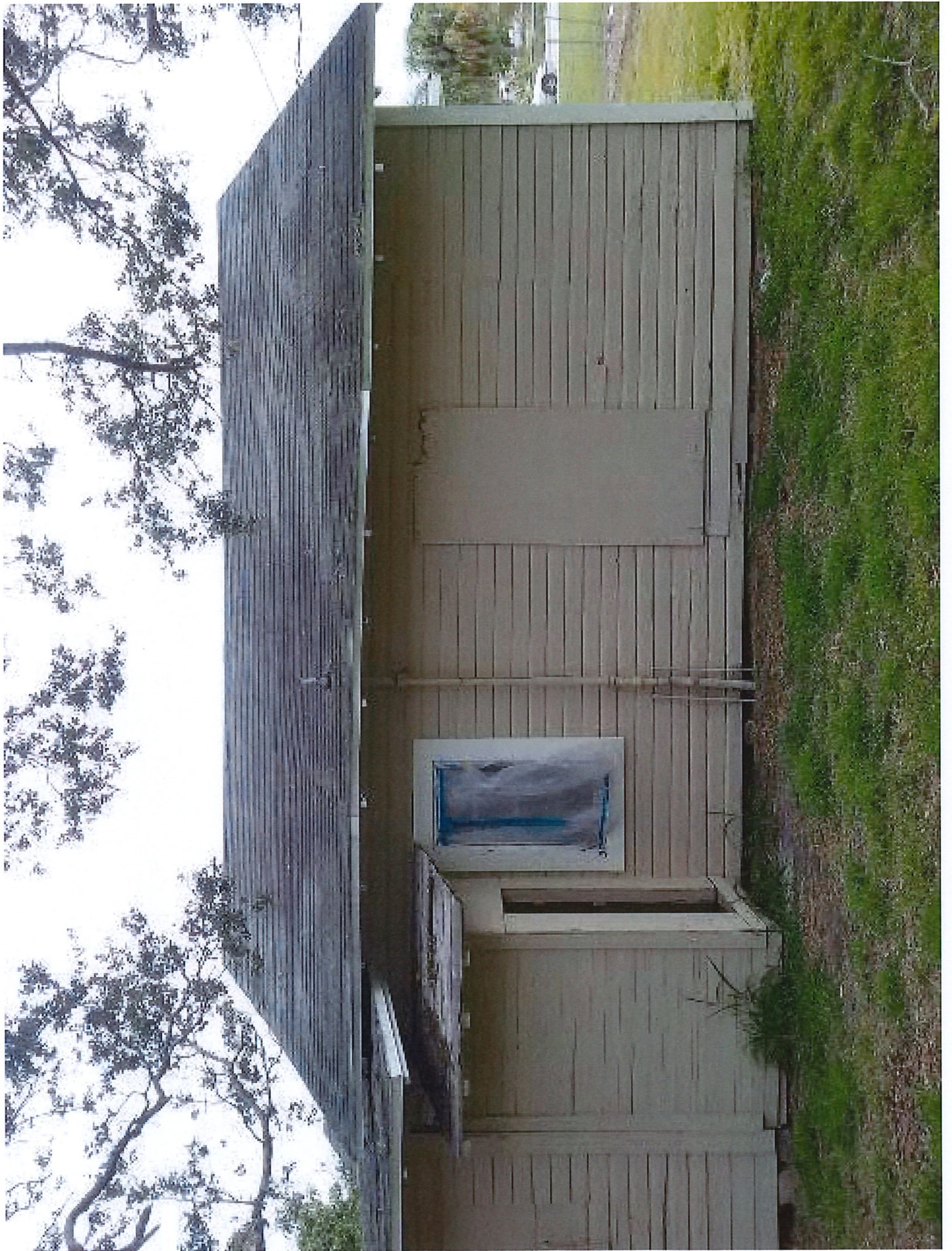
DATE: 12/07/07	SCALE: AS NOTED
DWG. BY: EAG	CHK. BY: S. SAFFELL
DRAWING NO.: DC9970	
SHEET 1 OF 5	

NO.	DATE	REVISIONS
1	1/10/01	68 anchors
2	11/8/02	GENERAL REV.
3	07/19/07	GENERAL REV.
4	12/13/07	UPDATE FORM/ADD ISO DETAILS
5	08/16/12	2010 FBC UPDATES
6	01/20/15	5TH EDITION FBC UPDATES

PRODUCT:	STEEL, STEEL EDGE DOOR
	6'-8" & 8'-0" SINGLE OUTSWING OPAQUE IMPACT DOOR
PART OR ASSEMBLY:	TYPICAL ELEVATIONS & GENERAL NOTES

JELD-WEN, INC.  
3737 LAKEPORT BLVD.  
KLAMATH FALLS, OR, 97601  
PH. 541-882-3451

































THE SUNRISE CITY  
**FORT PIERCE**  
PLANNING DEPARTMENT  
*Florida*



Bldg. Permit # \_\_\_\_\_

COA# 18-03

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 200 South Indian River Drive, Ft. Pierce, FL 34950  
 Parcel ID #: 2410-510-0006-010-6  
 Type of Designation:  Contributing  Non-contributing Site within the Downtown Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner / Applicant Information

Property Owner(s)  
Name(s): Kraaz & Kraaz Finance LLC  
 Mailing Address: 201 South 2nd Street, Suite 206, Ft. Pierce, FL 34950  
 Phone Number(s): 772-464-5885 Email: \_\_\_\_\_

Applicant  
Name(s): Oren K. Dowdy, SignCorp, Inc.  
 Mailing Address: P.O. Box 998, Winter Haven, FL 33882  
 Phone Number(s): 863-268-2825 Email: o.dowdy@signcorpinc.com

Representative  
Name(s): Oren K. Dowdy, SignCorp, Inc.  
 Mailing Address: P.O. Box 998, Winter Haven, FL 33882  
 Phone Number(s): 863-268-2825 Email: o.dowdy@signcorpinc.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, Kraaz & Kraaz Finance, LLC as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

1/3/17  
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 type="checkbox"/> Roof       |
| <input type="checkbox"/> Window(s)      | <input checked="" type="checkbox"/> Signage | <input type="checkbox"/> Shutter(s) | <input type="checkbox"/> Porch      |
| <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: \_\_\_\_\_

Remove existing 'Harbor Community Bank' on-site signage, and replace with new, like-kind signage, reflecting new bank branding (CenterState Bank)

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.



# CenterState

200 S Indian River Dr,  
Fort Pierce, FL 34950



6654 SR 544 East  
Winter Haven FL, 33881  
Ph: 863-268-2825



**WEST ELEVATION (SCALE: 3/16" = 1' - 0")**



**COLOR SCHEME**



(QTY - 1) CHANNEL LETTER SET ON CONTOUR PANEL AND RACEWAY. INSTALL TO FASCIA. (25 SQFT)

(QTY - 1) RECOVER EXISTING AWNING WITH FABRIC COVER TO MATCH PMS 281 BLUE. APPLY WHITE VINYL ATM TO VALANCE.

(QTY - 1) ROUTED FACE ALUMINUM PANEL WITH BACKED UP TRANSLUCENT WHITE ACRYLIC. PAINTED PMS 281 BLUE AND INSTALLED WITH COUNTERSUNK MECHANICAL FASTENERS.

EXISTING CONDITIONS



P.O. Box 998  
Winter Haven FL, 33882  
Ph: 813-224-1331  
FL LICENSE #ES12000111

Created For



Address: Center State Bank  
200 S Indian River Dr,  
Fort Pierce, FL 34950

Sales Representative:  
OREN DOWDY

Customer Approval

Landlord's Approval

Scale: NOTED

Date: 01/01/18

Filename: --

Designer: --

Revision Date:



Sheet:

2 of 13

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**NORTH ELEVATION (SCALE: 3/16" = 1'-0")**

**COLOR SCHEME**



(QTY - 1) CHANNEL LETTER SET ON  
CONTOUR PANEL AND RACEWAY.  
INSTALL TO FASCIA. (25 SOFT)

**EXISTING CONDITIONS**



P.O. Box 998  
Winter Haven FL, 33882  
Ph: 813-224-1331  
FL LICENSE #ES12000111

Created For



Address: Center State Bank  
200 S. Indian River Dr.  
Fort Pierce, FL 34950

Sales Representative:  
OREN DONDY

Customer Approval

Date

Landlord's Approval

Date

Scale: NOTED

Date: 01/01/18

Filename:

Designer:

Revision Date:



Sheet:

**3 of 13**

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**SOUTH ELEVATION (SCALE: 1/2"=1' -0")**

**COLOR SCHEME**

	PMS 321
	PMS 281
	WHITE



(QTY - 1) CHANNEL LETTER SET ON  
CONTOUR PANEL INSTALLED TO  
FASCIA, (11.1 SQFT)

EXISTING CONDITIONS



P.O. Box 998  
Winter Haven FL, 33882  
Ph: 813-224-1331  
FL LICENSE #ES12000111



Address: Center State Bank  
200 S Indian River Dr,  
Fort Pierce, FL 34950

Sales Representative:  
OREN DOWDY

Customer Approval

Date

Landlord's Approval

Date

Scale: NOTED

Date: 01/01/18

Filename: -

Designer: -

Revision Date:

- ↕
- ↕
- ↕
- ↕

Sheet:

4 of 13

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**CORNER ELEVATION (SCALE: NTS)**



EXISTING CONDITIONS



P.O. Box 998  
 Winter Haven FL, 33882  
 Ph: 813-224-1331  
 FL LICENSE #ES12000111

Created For



Address: Center State Bank  
 200 S Indian River Dr,  
 Fort Pierce, FL 34950

Sales Representative:  
 OREN DOWDY

Customer Approval

Date

Landlord's Approval

Date

Scale: NOTED

Date: 01/01/18

Filename:

Designer:

Revision Date:

- ↔
- ↔
- ↔
- ↔

Sheet:

5 of 13

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**ATM & AWNING (SCALE: 1/2"=1'-0")**



P.O. Box 998  
 Winter Haven FL, 33882  
 Ph: 813-224-1331  
 FL LICENSE #ES12000111



Address: Center State Bank  
 200 S Indian River Dr.  
 Fort Pierce, FL 34950

Sales Representative:  
 OREN DOWDY

Customer Approval

Date

Landlord's Approval

Date

Scale: NOTED

Date: 01/01/18

Filename: --

Designer: --

Revision Date:

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Sheet

**6 of 13**

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**COLOR SCHEME**



(QTY - 1) RECOVER EXISTING AWNING WITH FABRIC COVER TO MATCH PMS 281 BLUE. APPLY WHITE VINYL ATM TO VALANCE.

(QTY - 1) ROUTED FACE ALUMINUM PANEL WITH BACKED UP TRANSLUCENT WHITE ACRYLIC. PAINTED PMS 281 BLUE AND INSTALLED WITH COUNTERSUNK MECHANICAL FASTENERS. VERIFY NEW SIZE PRIOR TO FABRICATION.



EXISTING CONDITIONS



**SINGLE FACE MONUMENT SIGN (SCALE: 1/2"=1'-0")**



P.O. Box 998  
 Winter Haven FL, 33882  
 Ph: 813-224-1331  
 FL LICENSE #ES12000111



Address: Center State Bank  
 200 S Indian River Dr,  
 Fort Pierce, FL 34950

Sales Representative:  
 OREN DOWDY

Customer Approval Date

Landlord's Approval Date

Scale: NOTED  
 Date: 01/01/18  
 Filename: -  
 Designer: -

Revision Date:

7 of 13

This drawing is the sole property of SignCorp, Inc. It is to be used for the specific project and site identified herein. It is not to be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or by any information storage and retrieval system, without the prior written permission of SignCorp, Inc. Violation of these terms may result in legal action. SignCorp, Inc. reserves the right to charge for the drawing / design and / or install in some states.



**COLOR SCHEME**



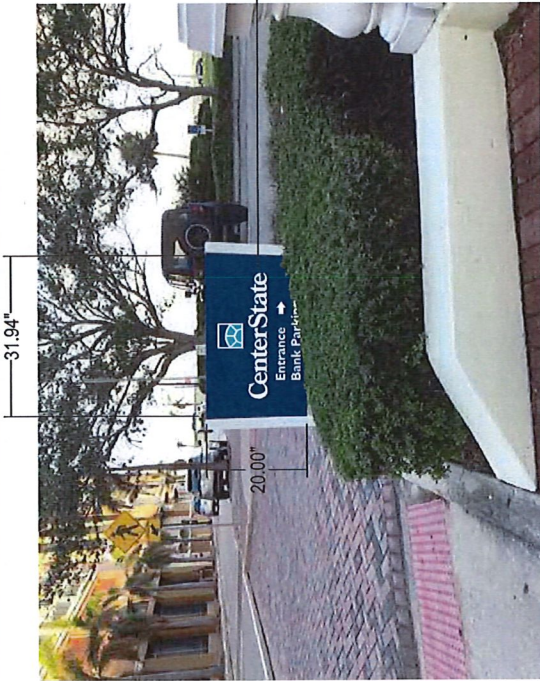
(QTY - 1) ROUTED FACE ALUMINUM PANEL WITH BACKED UP TRANSLUCENT WHITE ACRYLIC. PAINTED PMS 281 BLUE AND INSTALLED WITH COUNTERSUNK MECHANICAL FASTENERS. (19.11 SQFT)



EXISTING CONDITIONS



**DOUBLE SIDED DIRECTIONAL (SCALE: 1/2"=1'-0")**



(QTY - 1 SIDE A) .080 ALUMINUM PANEL  
 PAINTED PMS 281 BLUE WITH WHITE  
 VINYL LOGO AND COPY.  
 INSTALL OVER EXISTING SIGN PANEL  
 WITH DOUBLE SIDED TAPE.

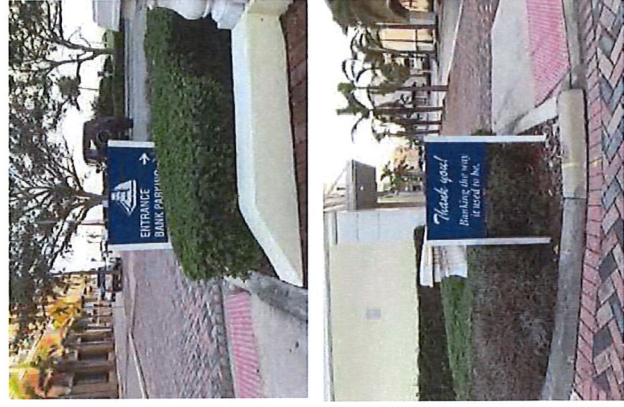


(QTY - 1 SIDE B) .080 ALUMINUM PANEL  
 PAINTED PMS 281 BLUE WITH WHITE  
 VINYL LOGO AND COPY.  
 INSTALL OVER EXISTING SIGN PANEL  
 WITH DOUBLE SIDED TAPE.

**COLOR SCHEME**

	PMS 321
	PMS 281
	WHITE

**EXISTING CONDITIONS**



P.O. Box 998  
 Winter Haven FL, 33882  
 Ph: 813-224-1331  
 FL LICENSE #ES12000111



Address: Center State Bank  
 200 S Indian River Dr,  
 Fort Pierce, FL 34950

Sales Representative:  
 OREN DOWDY

Customer Approval Date

Landlord's Approval Date

Scale: NOTED  
 Date: 01/01/18  
 Filename: --  
 Designer: --

Revision Date:

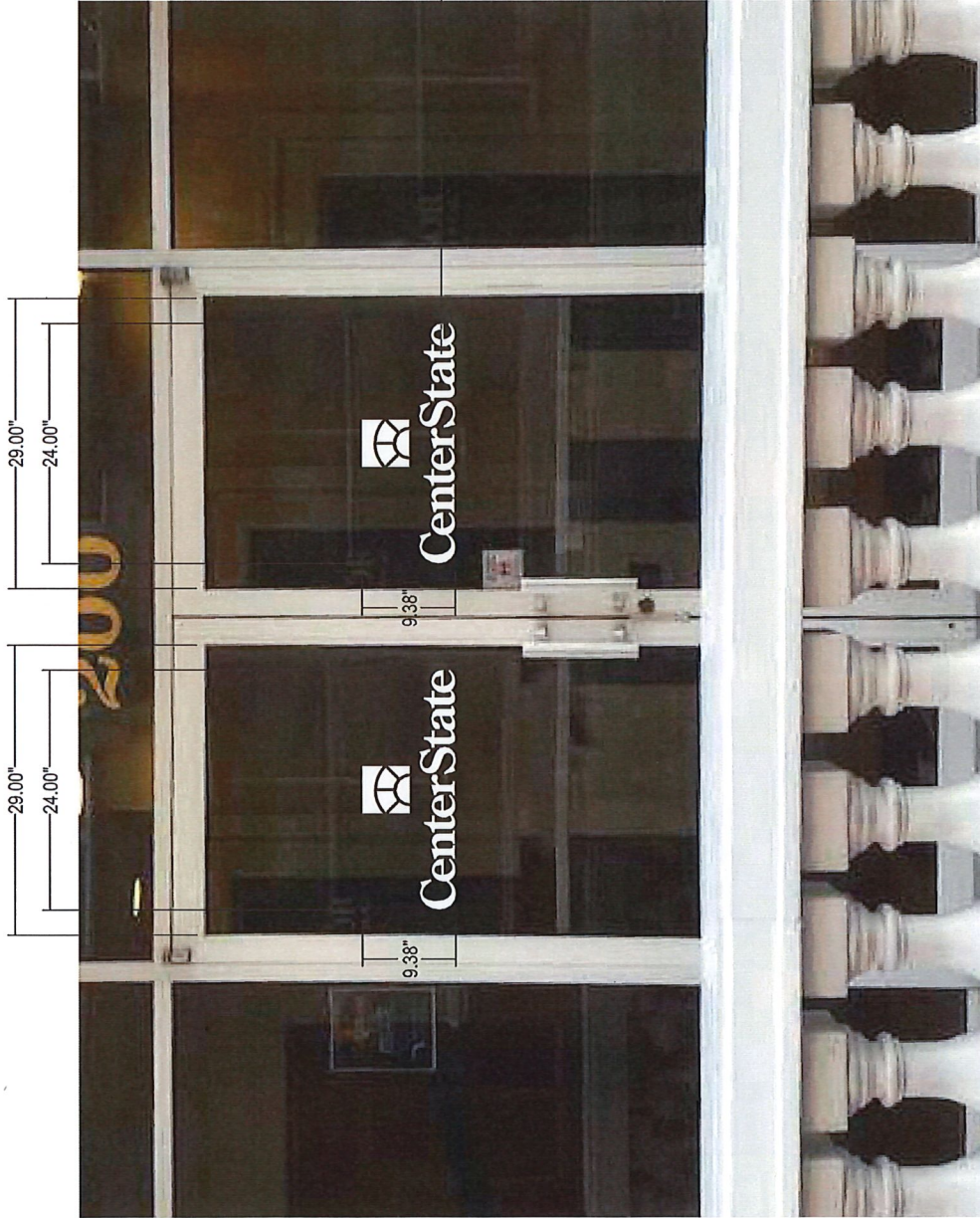
↕	↕	↕	↕
↕	↕	↕	↕

Sheet:

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**PRIMARY EXTERIOR ENTRANCE (SCALE: 1" = 1'-0")**



(QTY - 2), WHITE VINYL APPLIED FIRST SURFACE TO EXTERIOR GLASS DOORS

EXISTING CONDITIONS



P.O. Box 998  
Winter Haven FL, 33882  
Ph: 813-224-1331  
FL LICENSE #ES12000111



Address: Center State Bank  
200 S Indian River Dr,  
Fort Pierce, FL 34950

Sales Representative: OREN DOWDY  
Customer Approval Date  
Landlord's Approval Date

Scale: NOTED  
Date: 01/01/18  
Filename: --  
Designer: --

Revision Date:

Sheet: **9 of 13**

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**PRIMARY INTERIOR ENTRANCE (SCALE: 3/16" = 1' - 0")**



P.O. Box 998  
 Winter Haven FL, 33882  
 Ph: 813-224-1331  
 FL LICENSE #ES12000111



Address: Center State Bank  
 200 S Indian River Dr,  
 Fort Pierce, FL 34950

Sales Representative:  
 OREN DOWDY

Customer Approval

Landlord's Approval

Scale: NOTED  
 Date: 01/01/18

Filename:  
 Designer:

Revision Date:

6	6	6	6
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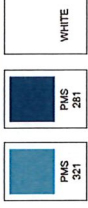
Sheet:

**10 of 13**

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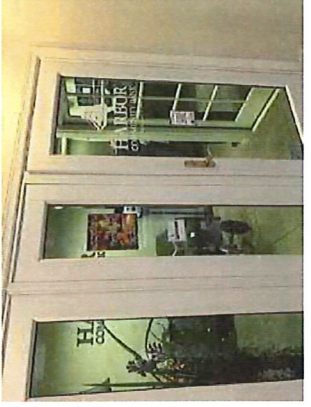


**COLOR SCHEME**



(QTY - 2) WHITE VINYL APPLIED FIRST SURFACE TO INTERIOR GLASS DOORS.

EXISTING CONDITIONS



EXECUTIVE OFFICE ENTRANCE (SCALE: 1 1/2" = 1'-0")

COLOR SCHEME



(QTY - 1) WHITE VINYL APPLIED FIRST SURFACE TO INTERIOR GLASS DOOR.

EXISTING CONDITIONS



P.O. Box 998  
Winter Haven FL, 33882  
Ph: 813-224-1331  
FL LICENSE #ES12000111



Address: Center State Bank  
200 S Indian River Dr,  
Fort Pierce, FL 34950

Sales Representative: OREN DOWDY  
Customer Approval Date  
Landlord's Approval Date

Scale: NOTED  
Date: 01/01/18  
Filename: --  
Designer: --

Revision Date:  
◆ ◆ ◆ ◆

Sheet: 11 of 13

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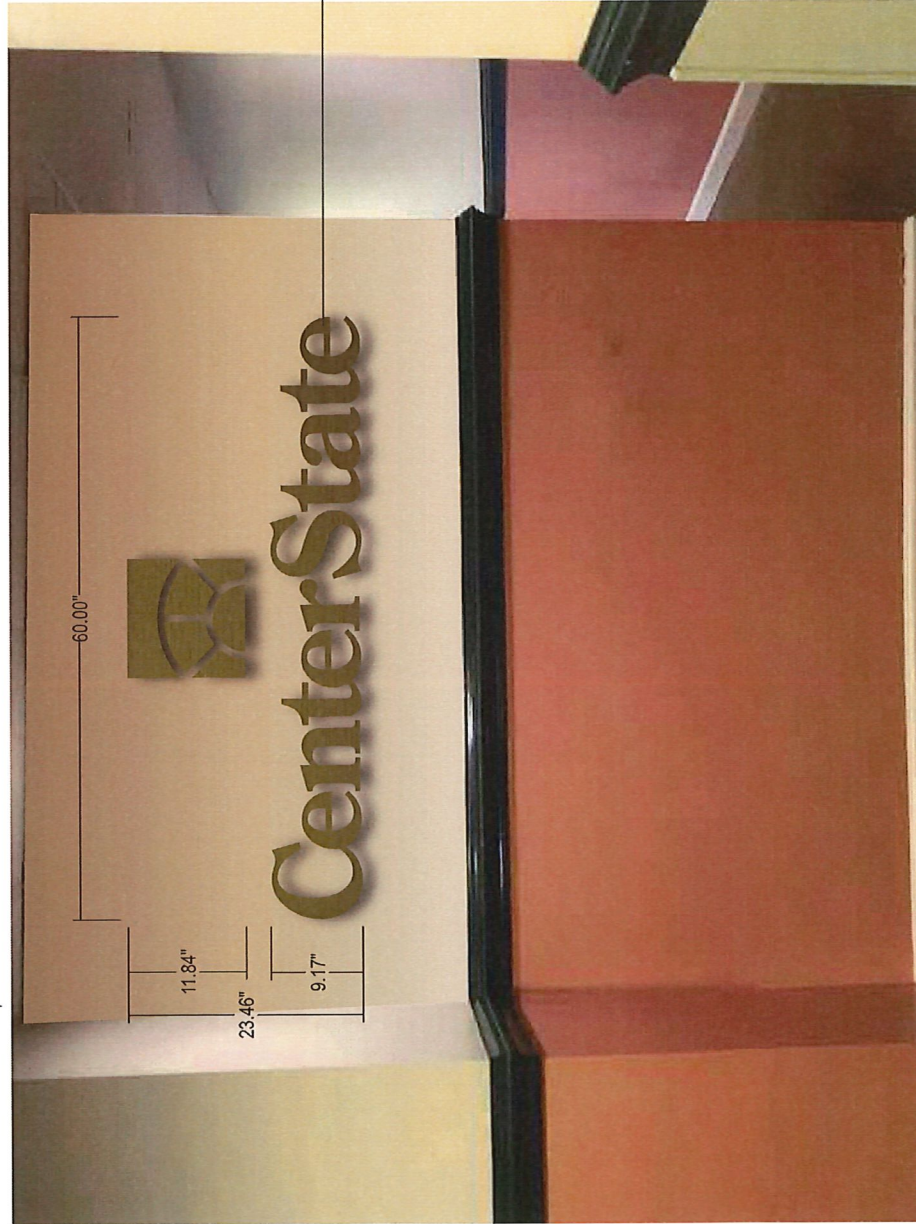




**SECONDARY INTERIOR BRANDING (SCALE: 1"=1'-0")**

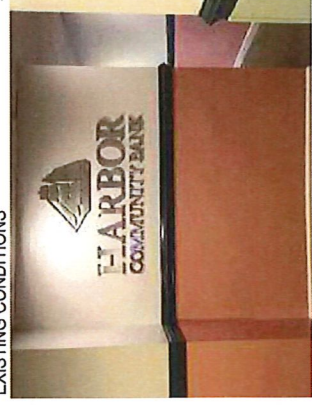
**COLOR SCHEME**

	PMS 327
	PMS 281
	WHITE



1/2" BLACK ACRYLIC DIMENSIONAL LOGO WITH CHEMETAL 925 BRUSHED MEDIUM BRONZE LAMINATE APPLIED TO FACE. HORIZONTAL BRUSHED PATTERN.  
INSTALL 1/2" FROM WALL WITH THREADED STUDS

EXISTING CONDITIONS



P.O. Box 998  
Winter Haven FL, 33882  
Ph: 813-224-1331  
FL LICENSE #ES12000111

Created For



Address: Center State Bank  
200 S Indian River Dr,  
Fort Pierce, FL 34950

Sales Representative:  
OREN DOWDY

Customer Approval

Date

Landlord's Approval

Date

Scale: NOTED

Date: 01/01/18

Filename: --

Designer: --

Revision Date:

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Sheet:

13 of 13

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**RECEIVED**

JAN 05 2018

CITY OF FORT PIERCE  
PLANNING & ZONING

COA# 18-051

Bldg. Permit # \_\_\_\_\_

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 510 N. 9<sup>TH</sup> STREET

Parcel ID #: 2410-601-0101-000-8

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): GOOD NEWS MISSIONARY BAPTIST CHURCH, INC.

Mailing Address: 510 N. 9<sup>TH</sup> STREET

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

#### Applicant

Name(s): REV. HARRY SHAW

Mailing Address: 402 N. 30<sup>TH</sup> STREET

Phone Number(s): 772-465-2322 Email: \_\_\_\_\_

#### Representative

Name(s): 772-380-3282  
LEROY BENNETT, JR.

Mailing Address: 2101 VALENCIA AVENUE, FT. PIERCE, FL 34946

Phone Number(s): 772-971-4508 Email: LEROYBJR77@ATT.NET

**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, REV. HARRY SHAW as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Rev Harry Shaw  
Signature of Owner

JAN. 4, 2018  
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) INSTALLING A ROOF COVERING OVER EXISTING DOOR AND SIDE WALK

Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: CONSTRUCT TWO (2) CONCRETE FOUNDATION PADS, TWO (2) CONCRETE BLOCK COLUMNS WITH BEAM AND RAFTERS ACROSS TOP, COVERED WITH PLYWOOD AND ROOFING MATERIAL.

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): \_\_\_\_\_

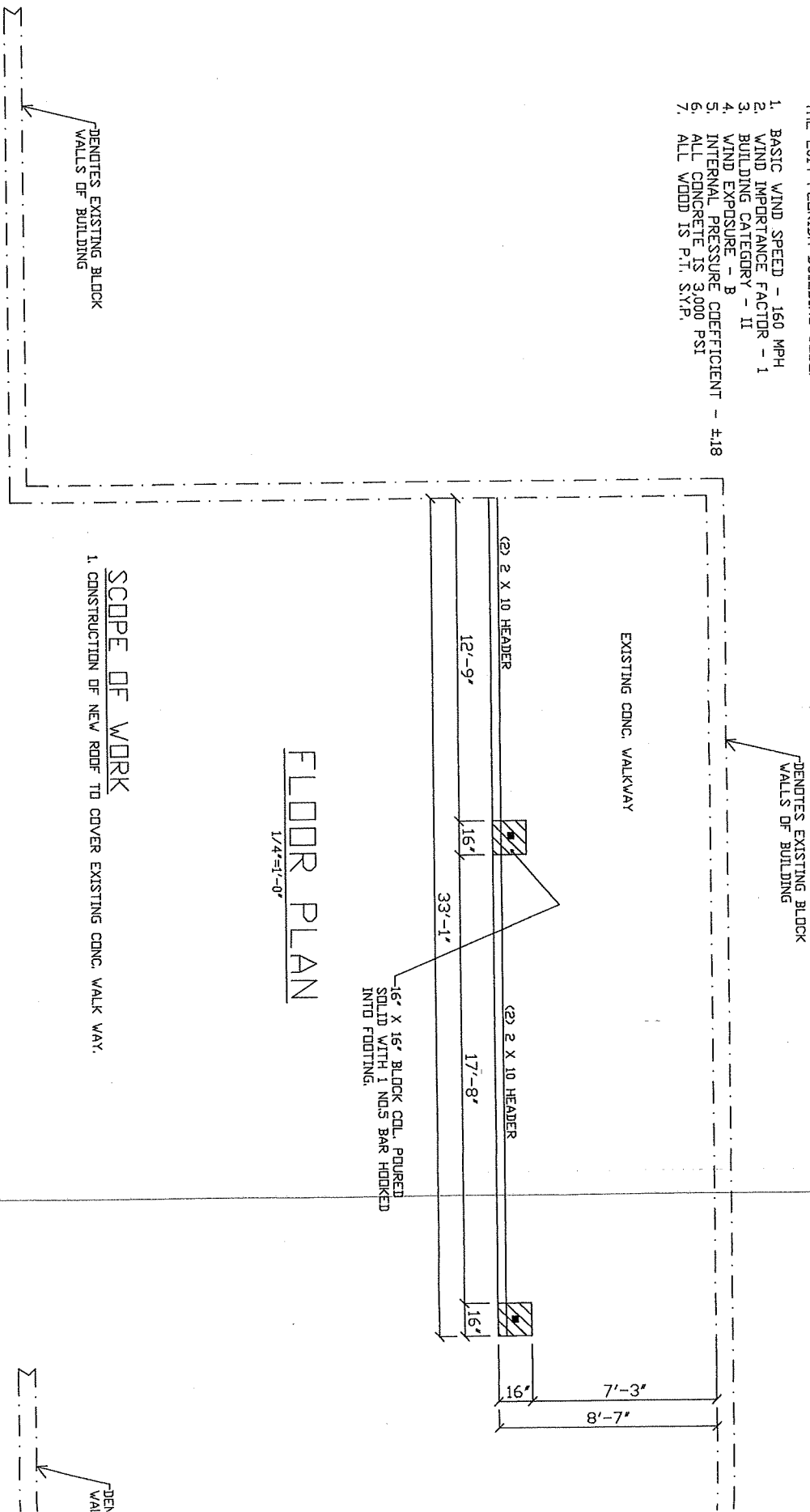
**Application Requirements**

- \$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.

# WIND LOAD INFORMATION

THIS BUILDING HAS BEEN DESIGNED AS AN ENCLOSED STRUCTURE IN ACCORDANCE WITH THE 2014 FLORIDA BUILDING CODE.

1. BASIC WIND SPEED - 160 MPH
2. WIND IMPORTANCE FACTOR - 1
3. BUILDING CATEGORY - II
4. WIND EXPOSURE - B
5. INTERNAL PRESSURE COEFFICIENT - ±1.8
6. ALL CONCRETE IS 3,000 PSI
7. ALL WOOD IS P.T. S.Y.P.



DENOTES EXISTING BLOCK WALLS OF BUILDING

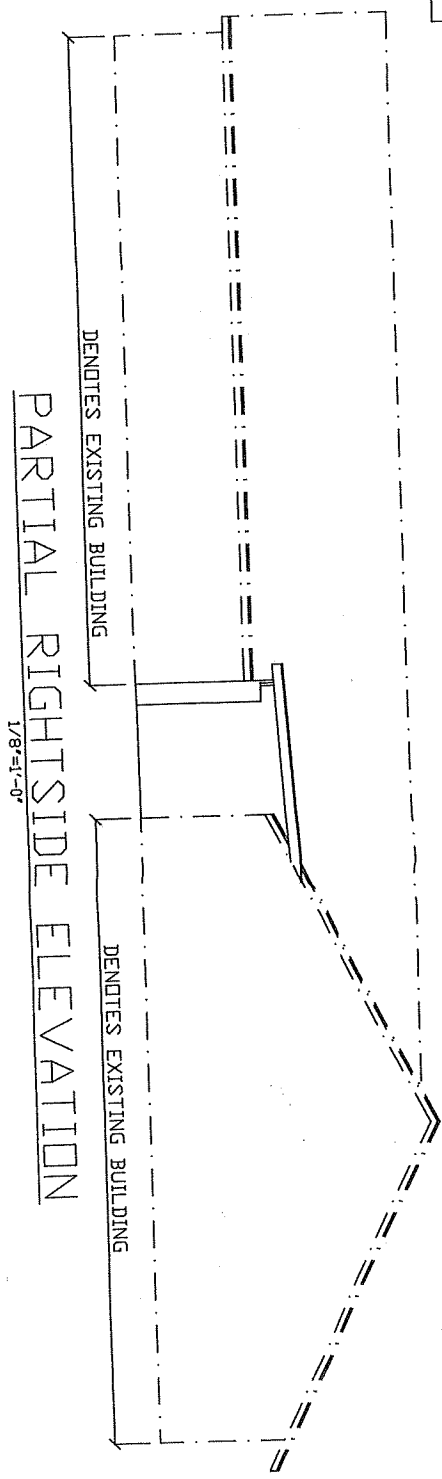
DENOTES EXISTING BLOCK WALLS OF BUILDING

**SCOPE OF WORK**  
1. CONSTRUCTION OF NEW ROOF TO COVER EXISTING CONC. WALK WAY.

## FLOOR PLAN

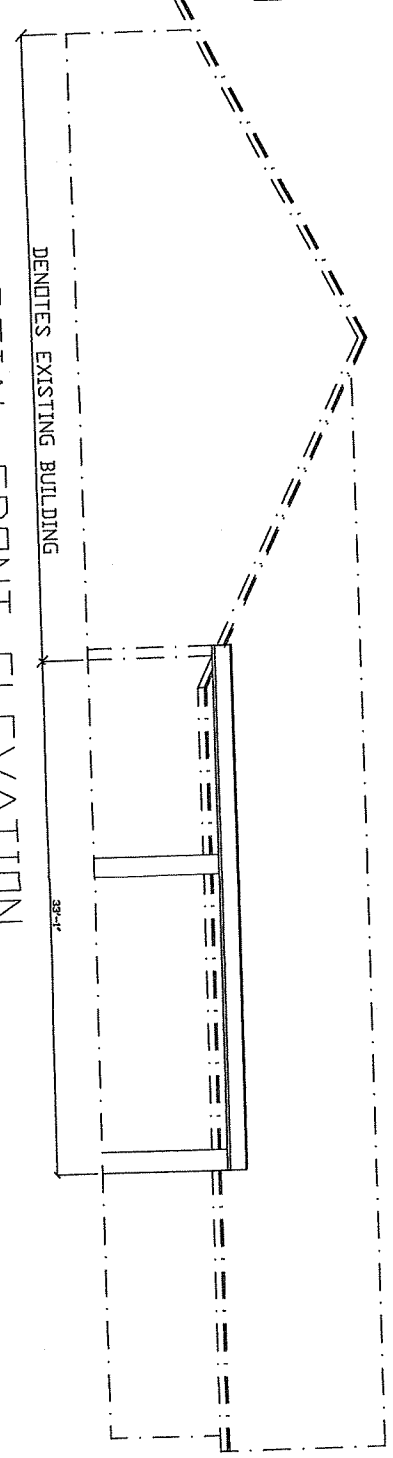
1/4"=1'-0"

DENOTES EXISTING BLOCK WALLS OF BUILDING



PARTIAL RIGHTSIDE ELEVATION

1/8"=1'-0"



PARTIAL FRONT ELEVATION

1/8"=1'-0"

SITE ADDRESS: 510 N. 9TH STREET  
FT. PIERCE, FL.

PAGE NO.	1
OF	1
DATE: 7-16-17	
DRAWN BY: W. PAIGE	

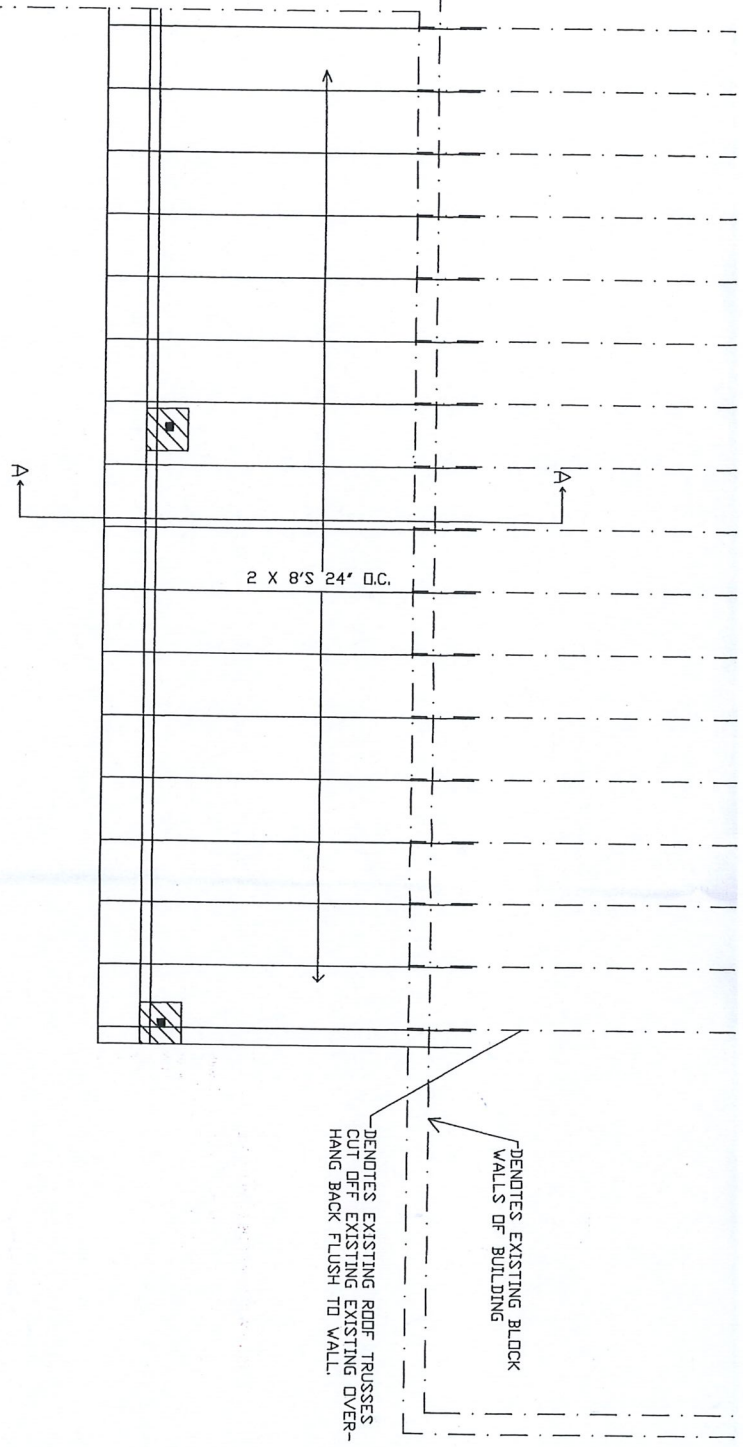
DESIGNER: PAIGE DRAFTING SERVICE  
PHONE (321)-543-4645  
ADDRESS: 470 OXFORD AVE.

ENGINEER: WAYNE GANDY  
PHONE (321)-543-4645  
ADDRESS: 470 OXFORD AVE.  
M.I., FL 32953

10K

FRAMING PLAN AT NEW COVERED WALK-WAY

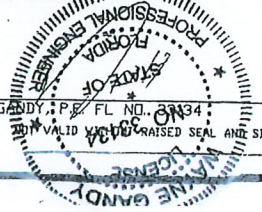
1/4"=1'-0"

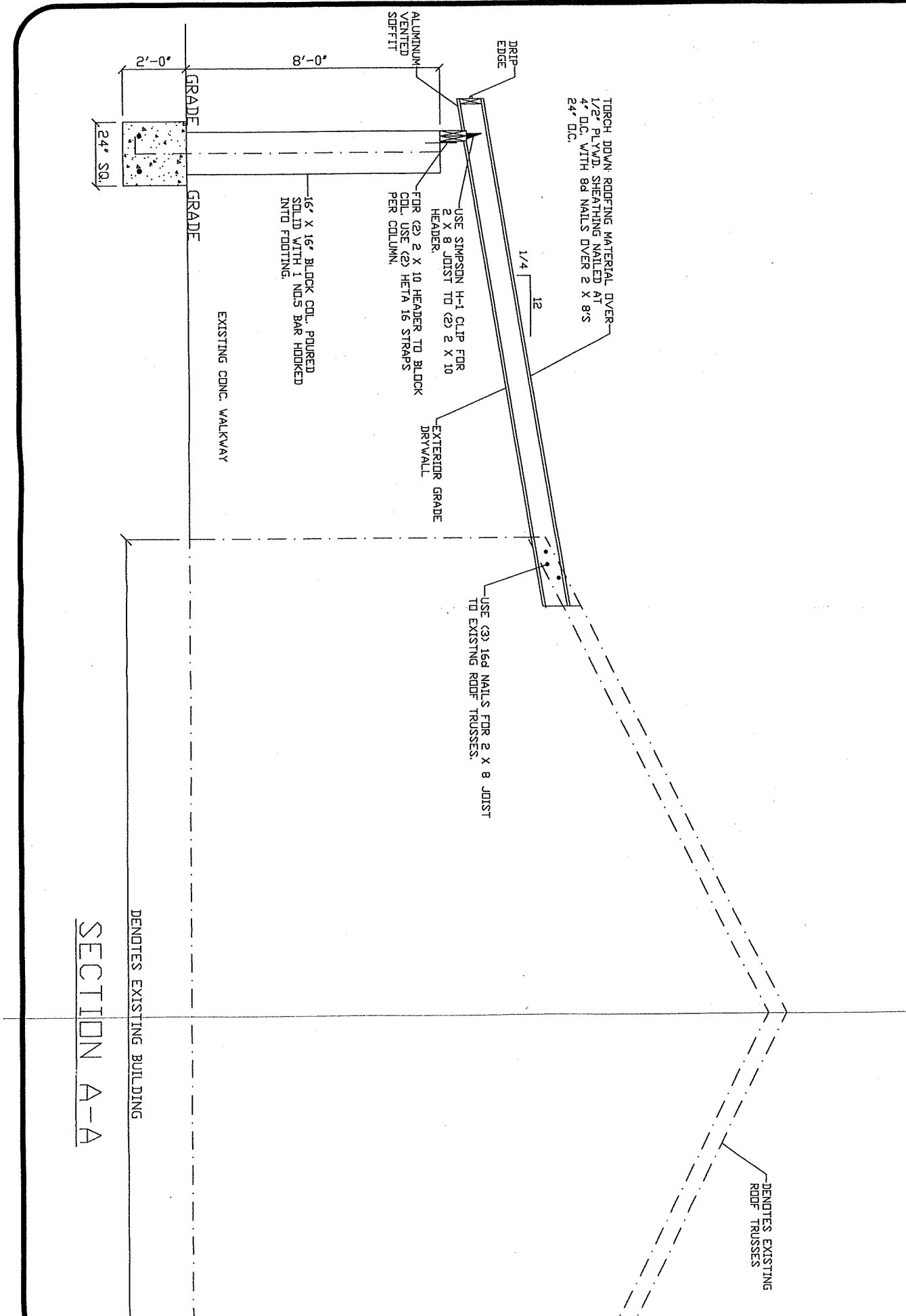


THE DESIGN INDICATED IN THE CONSTRUCTION DOCUMENTS DOES, TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF, COMPLY WITH THE 2014 FLORIDA BUILDING CODE AND ALL OTHER APPLICABLE CODES.

CONTRACTOR : LEROY BENNETT  
PHONE : (772)-971-4508

WAYNE GANDY, P.E. FL NO. 23434 DATE





TORCH DOWN ROOFING MATERIAL OVER  
1/2" PLYWD. SHEATHING NAILED AT  
4' O.C. WITH 8d NAILS OVER 2 X 8'S  
24" O.C.

1/4  
12

DRIP  
EDGE

USE SIMPSON H-1 CLIP FOR  
2 X 8 JOIST TO (2) 2 X 10  
HEADER.  
FOR (2) 2 X 10 HEADER TO BLOCK  
COL. USE (2) HETA 16 STRAPS  
PER COLUMN.

EXTERIOR  
GRADE  
DRYWALL

USE (3) 16d NAILS FOR 2 X 8 JOIST  
TO EXISTING ROOF TRUSSES.

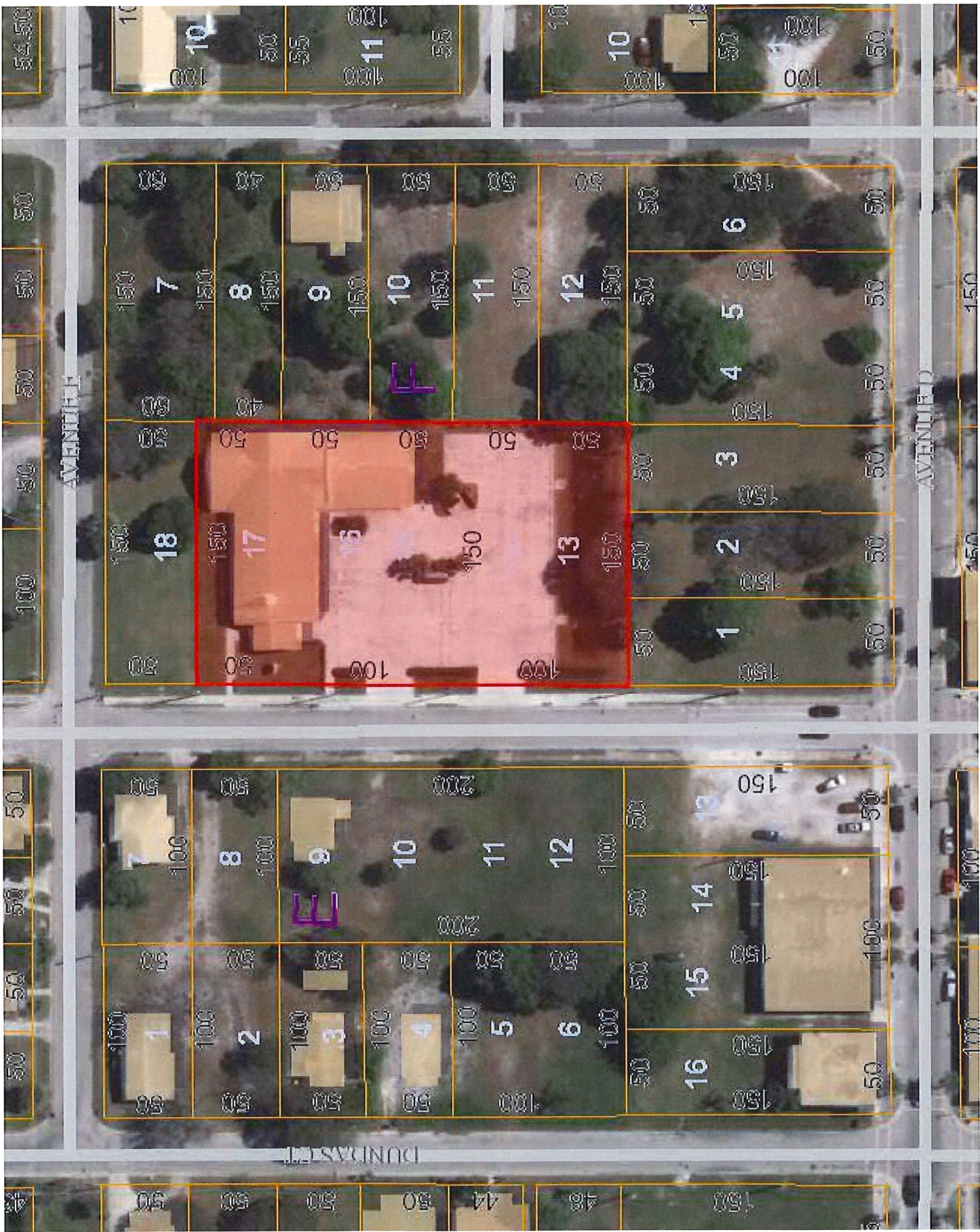
16' X 16' BLOCK COL. POURED  
SOLID WITH 1 NO. 5 BAR HOOKED  
INTO FOOTING.

EXISTING CONC. WALKWAY

DENOTES EXISTING BUILDING

SECTION A-A

DENOTES EXISTING  
ROOF TRUSSES



AVENUE H

AVENUE D

DUNDAS ST

18

17

16

15

13

2

3

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

COA#18-06     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 411 N 2<sup>nd</sup> Street

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Addition of a condensing unit to walk in cooler.  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standards 9 & 10.

**APPROVED:**

*Board Approval*

*Administrative Approval*

\_\_\_\_\_  
 Paul Samson, Chair                      Date  
 Historic Preservation Board

  
 \_\_\_\_\_                      01/16/18  
 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](mailto: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/Applicant	Jon Nolli 411 N 2 <sup>nd</sup> Street Fort Pierce, FL 34950	E-Mail <a href="mailto:jonnolli@aol.com">jonnolli@aol.com</a>
Other	Paul Thomas, CFP Building Administrator Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



RECEIVED

JAN 16 2018

COA# 18-06

Bldg. Permit # \_\_\_\_\_

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site:

411 N 2nd St Ft 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):

Jon Nollis

Mailing Address:

411 N 2nd St Ft Pierce FL 34950

Phone Number(s):

561-758-6457 Email: jonnollis@aol.com

Applicant

Name(s):

Crown RCF

Mailing Address:

717 Holly Ave

Phone Number(s):

772 461 6756 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, Jon Nollis as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

12/16/17  
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) adding refrigeration to the walk-in cooler

Please provide a detailed description of the proposed work to be performed: It seems as though the location of the refrigeration unit needs to be defined.

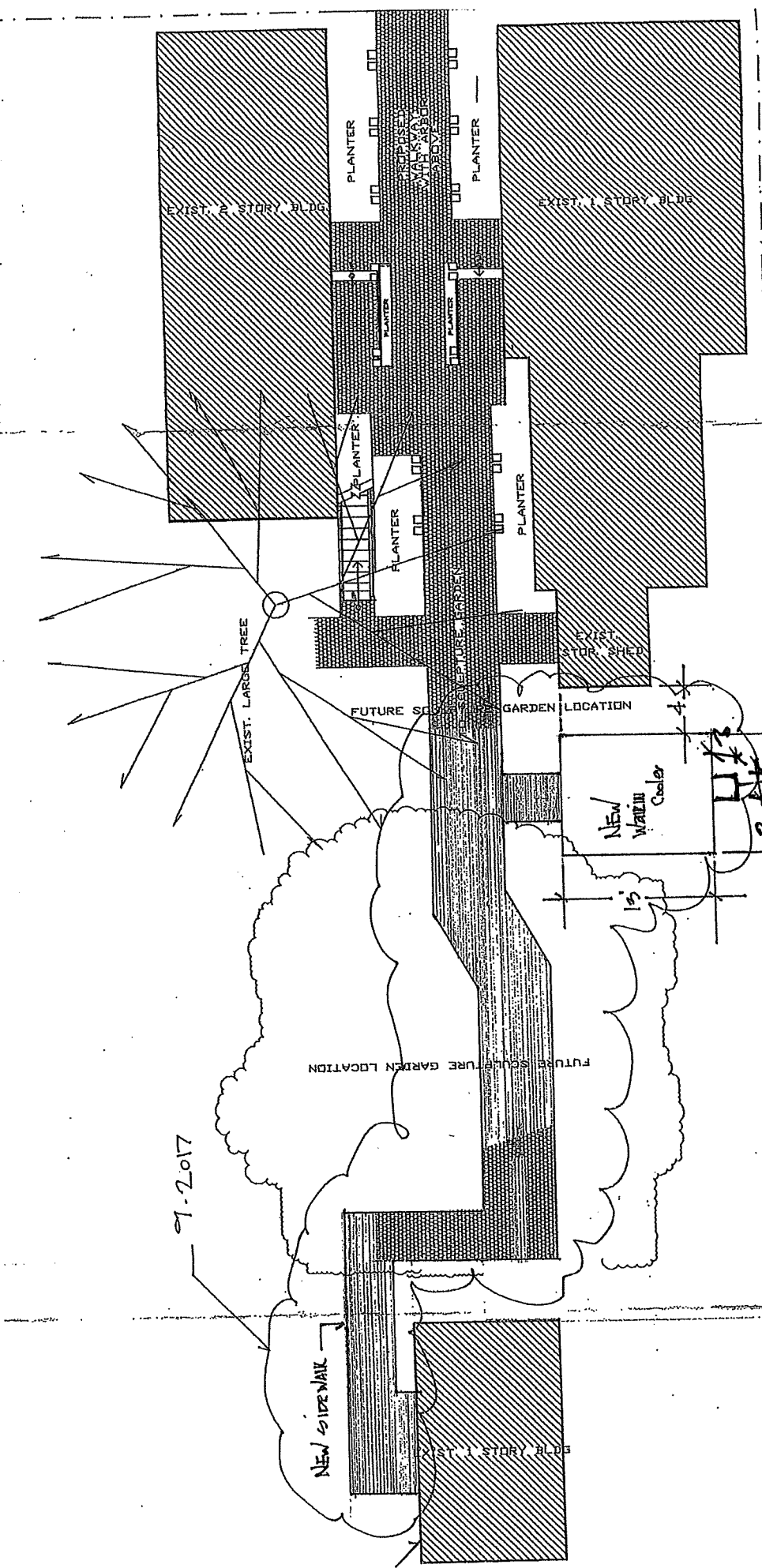
Have other alterations been made to the site within the last 12 months?  No  Yes, 3 other permits have been filed

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

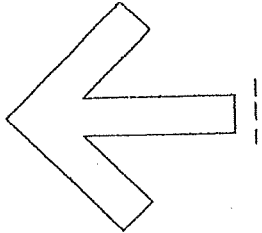
**Application Requirements**

- \$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.

**TRENTON**  
REFRIGERATION PRODUCTS

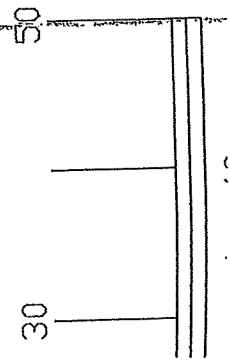


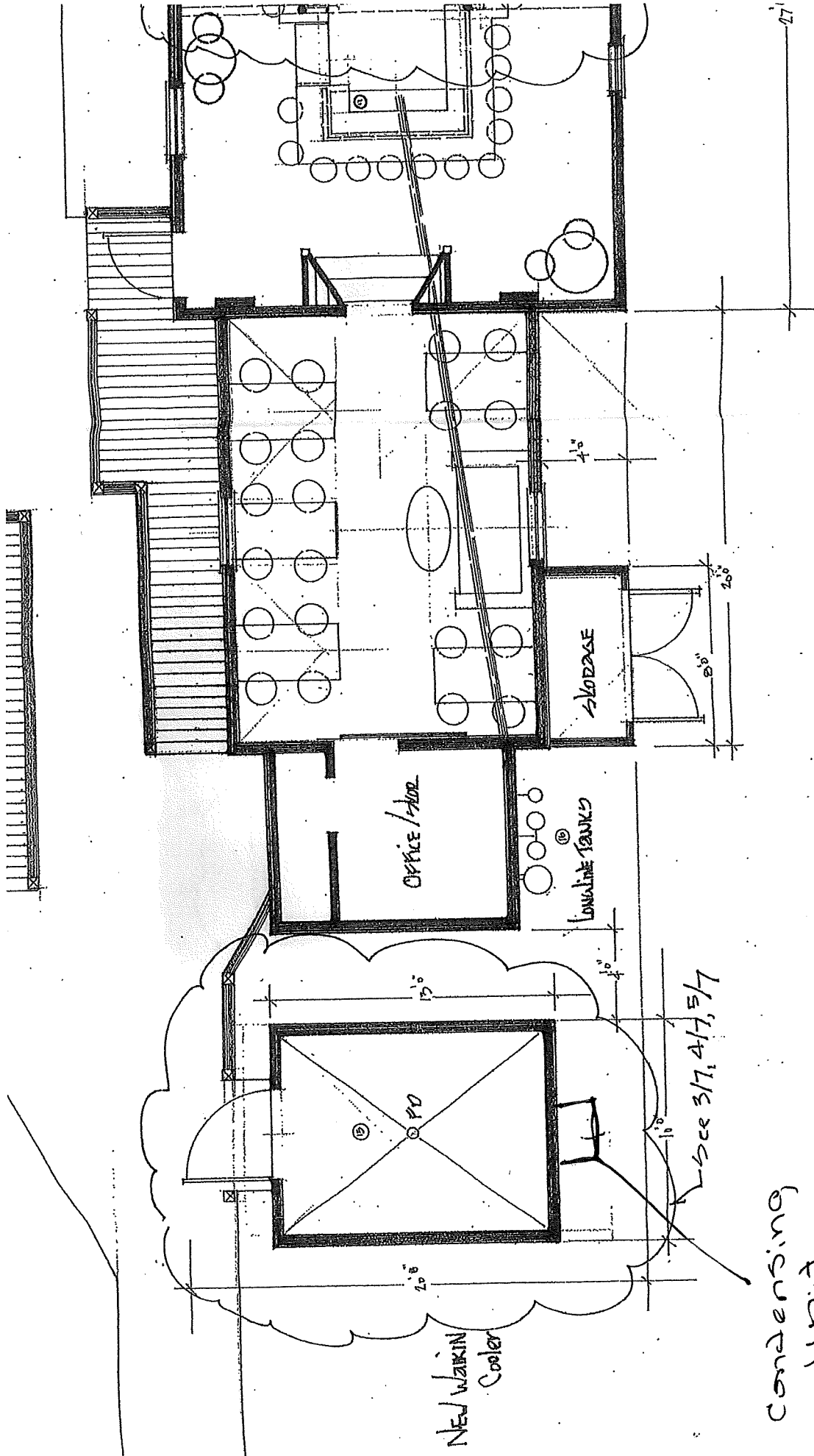
9-2017



Condensing Unit

4 FT  
8' X 3'

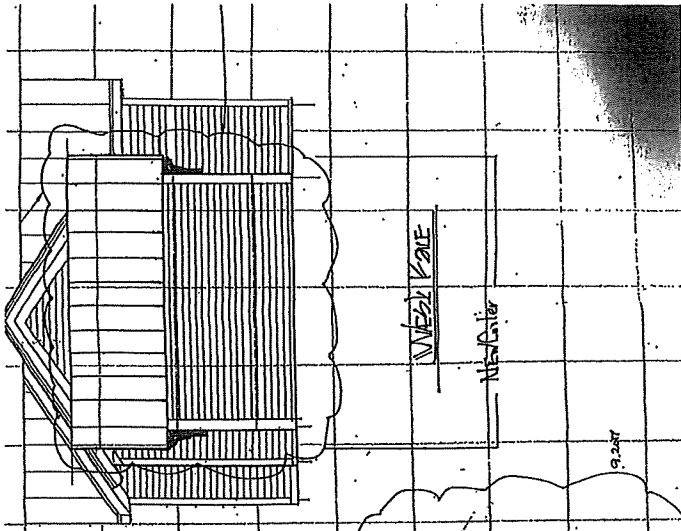




**4071409 NORTH SECOND STREET  
FORT PIERCE, FLORIDA**

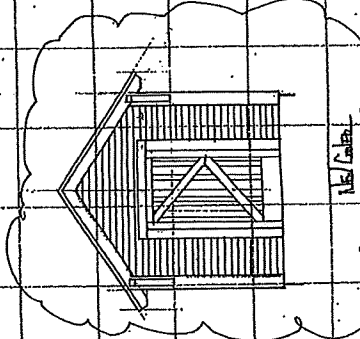
PLAN PRE  
CLEVELAND DES  
500 AVENUE

CONDENSING  
UNIT 411

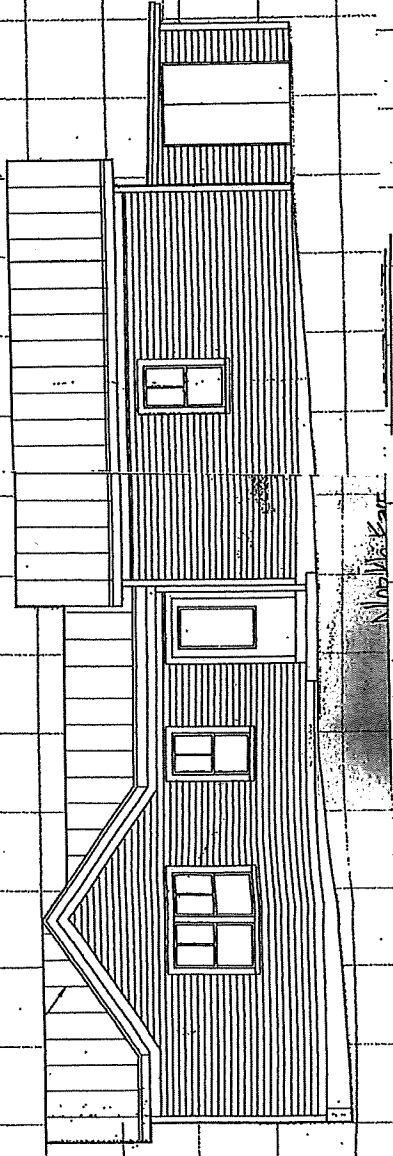


West Elevation

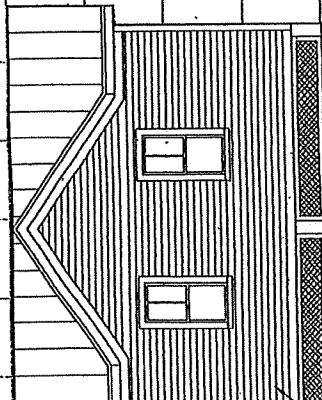
New Gable



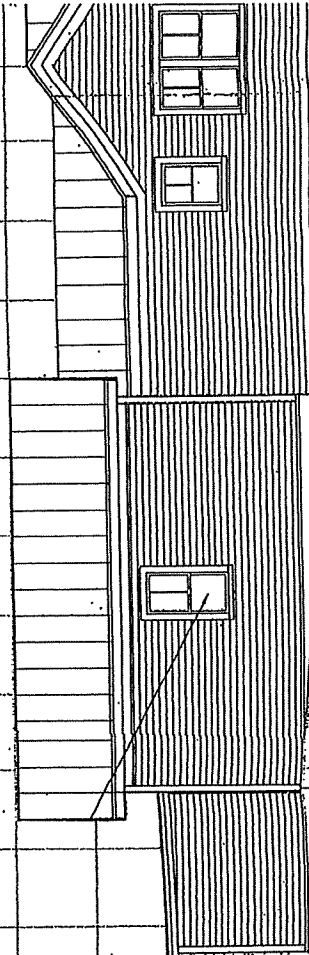
East Elevation



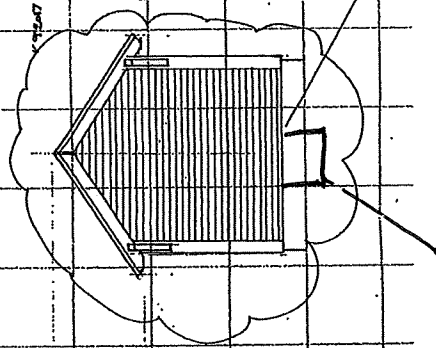
North Elevation



South Elevation



West Elevation



East Elevation

Condensing  
Unit



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

COA#18-07     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 716 S 10<sup>th</sup> Street

Contributing     Non-Contributing     Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Replace back door (not original to the structure).  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

\_\_\_\_\_  
1/23/18  
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](mailto: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/Applicant	Kara Wood 1717 S US Hwy 1, Suite 5 PMB 668 Fort Pierce, FL 34950	E-Mail Ywood720@gmail.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 # 17-3457

COA# 18-07

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 716 S 10th Street  
 Parcel ID #: 2410-710-0022-000-5  
 Type of Designation:  Contributing  Non-contributing Site within the Oakland Park Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s) Name(s): Kara Wood  
 Mailing Address: 1717 S US Hwy. 1 Suite 5, pmB 668 Fort Pierce, FL 34950  
 Phone Number(s): 305-778-6117 Email: yvwood720@gmail.com

Applicant Name(s): same (Contractor: J & G Carpentry)  
 Mailing Address: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Representative Name(s): same  
 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, Kara Wood as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Kara Wood  
Signature of Owner

01/16/2018  
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: *replace back door; door dimensions & material information are contained in permit application. Permit #17-3657. Doors to be replaced are not original to the structure.*

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.



# JELDOWEN WINDOWS & DOORS

## DESIGN PRO / SMOOTH PRO FULL LITE NON-IMPACT

FOR USE OUTSIDE THE HIGH VELOCITY HURRICANE ZONE (HVHZ)

### GENERAL NOTES:

- THE PRODUCT SHOWN HEREIN IS DESIGNED AND MANUFACTURED TO COMPLY WITH THE CURRENT INTERNATIONAL BUILDING CODE (IBC), INTERNATIONAL RESIDENTIAL CODE (IRC), AND FLORIDA BUILDING CODE (FBC), EXCLUDING HVHZ AND HAS BEEN EVALUATED ACCORDING TO THE FOLLOWING:
  - ASTM E2330-02
  - AAMA 1304-02
  - TAS 202-94
- ADEQUACY OF THE EXISTING STRUCTURAL CONCRETE/MASONRY OR 2X FRAMING AS A MAIN WIND FORCE RESISTING SYSTEM CAPABLE OF WITHSTANDING AND TRANSFERRING APPLIED PRODUCT LOADS TO THE FOUNDATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT OF RECORD FOR THE PROJECT OF INSTALLATION.
- THE INSTALLATION DETAILS DESCRIBED HEREIN ARE GENERIC AND MAY NOT REFLECT ACTUAL CONDITIONS FOR A SPECIFIC SITE. IF SITE CONDITIONS CAUSE INSTALLATION TO DEVIATE FROM THE REQUIREMENTS DETAILED HEREIN, A LICENSED ENGINEER OR ARCHITECT SHALL PREPARE SITE SPECIFIC DOCUMENTS FOR USE WITH THIS DOCUMENT.
- APPROVED IMPACT PROTECTIVE SYSTEM IS REQUIRED ON THIS PRODUCT IN AREAS REQUIRING IMPACT RESISTANCE.
- GLASS MEETS THE REQUIREMENTS OF ASTM E 1300 GLASS CHARTS. SEE SHEET 6 FOR GLAZING DETAILS.
- FULL LITE APPROVAL COVERS USE OF FRACTIONAL GLAZING, INCLUDING INTERNAL GRID, BLINDS BETWEEN GLASS, DECORATIVE, AND EXTERNAL AND INTERNAL WROUGHT IRON. RADIUS (SHAPED) LITES ARE QUALIFIED FOR 6'-8" DOORS AT DP +/-50 PSF ONLY.
- NOTE: AFCO H-497 SILL MEETS WATER INFILTRATION AT WATER TEST PRESSURE (WTP) OF 9.0 PSF. REMAINING SILLS NOT RATED FOR WATER INFILTRATION. IF AUTHORITY HAVING JURISDICTION REQUIRES THAT PRODUCT MEETS THIS REQUIREMENT, PRODUCT SHALL BE USED WHEN INSTALLED AT LOCATION PROTECTED BY OVERHANG SUCH THAT OVERHANG (OH) RATIO = OH LENGTH + OH HEIGHT IS  $\geq 1.0$

SHEET	REVISION	SHEET DESCRIPTION
1	B	TYPICAL ELEVATIONS, DESIGN PRESSURES, AND GENERAL NOTES
2	A	TYPICAL ANCHOR LAYOUTS AND NOTES
3	A	OPTIONAL 2X BUCK ANCHORING DETAILS
4	A	VERTICAL ASSEMBLIES
5	A	HORIZONTAL ASSEMBLIES
6	A	GLAZING DETAILS
7	A	WOOD SUBSTRATES
8	A	CONCRETE SUBSTRATES
9	A	COMPONENTS & BILL OF MATERIALS

### TABLE OF CONTENTS

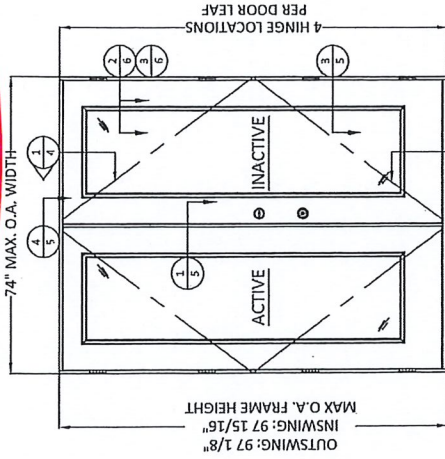
MAX. OVERALL NOMINAL SIZE	HEIGHT	WIDTH	INSWING POS.	OUTSWING POS.	DESIGN PRESSURE (PSF)	MISSILE IMPACT RATING
XX	6'-0"	6'-8"	50*	50*	50	NON-IMPACT
XX RADIUS	6'-0"	6'-8"	50*	50*	50	NON-IMPACT
XX	6'-0"	8'-0"	50*	50*	50	NON-IMPACT

\*SEE GENERAL NOTE 7, SHEET 3, FOR WATER INFILTRATION APPROVED SILLS.

NOTE:  
INACTIVE AND ACTIVE DOOR PANEL ORIENTATION IS INTERCHANGEABLE.

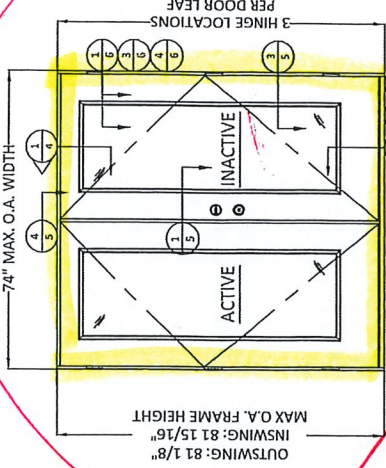
### 1 TYP. ELEVATION-2

8'-0" DOOR HEIGHT



### 1 TYP. ELEVATION-1

8'-0" DOOR HEIGHT



PREPARED BY:



**BUILDING DROPS, INC.**  
398 E. DANIA BEACH BLVD., STE. 338  
DANIA BEACH, FL 33004  
PH: (954)399-8278  
FAX: (954)744-4729  
WEB: www.buildingdrops.com

**JELDOWEN**  
WINDOWS & DOORS  
3737 LAKEPORT BLVD.,  
KLAMATH FALLS, OR 97601  
PH: (541)882-2451  
FAX: (541)850-2609

DESIGN PRO/SMOOTH PRO FULL LITE  
NON-IMPACT  
TYPICAL ELEVATIONS, DESIGN  
PRESSURES, AND GENERAL NOTES

TITLE:

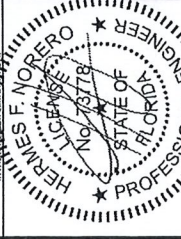
REMARKS

BY DATE

Add Multi-Point Lock GL 06/12/14

Add TAS 202-94 Standard SW 09/22/14

THIS DOCUMENT IS THE PROPERTY OF BUILDING DROPS, INC. AND SHALL NOT BE REPRODUCED IN WHOLE OR PART WITHOUT WRITTEN CONSENT OF BUILDING DROPS, INC. MARKINGS TO THE DOCUMENT ARE NOT PERMITTED AND MAY BE PENALIZED.



398 E. DANIA BEACH BLVD., STE. 338  
DANIA BEACH, FL 33004  
PH: (954)399-8278  
FAX: (954)744-4729  
WWW.BUILDINGDROPS.COM  
PEFC CERT. OF AUTHORIZATION NO. 20578

Digitally signed by Hermes F. Noreiro, P.E.  
Reason: I am approving this document  
Date: 2014.09.26 14:55:17 -0400

DATE: 02.05.14

DWG BY: GL/TJM

CHK BY: SS/MISS

SCALE: NTS

DWG. #: A010834A

SHEET: OF9

1







Permit #: 17-3657  
Kara Wood to: Maria Lewicka

01/17/2018 01:01 PM

---

2 attachments



IMG\_0914.JPG IMG\_0915.JPG

---

Maria,

Attached are photos of the rear doors to be replaced. I included a closer view so you can see the materials are distinct from the original wood doors at the front entrance. These doors are metal with plastic muntins that are rotting out.

Please let me know if you need any additional information for you to be able to approve the permit.

Thanks,  
Kara Wood  
305.778.6117





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

COA#18-05     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 826 Atlantic Avenue

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Remove existing asphalt shingle roof damaged by hurricane and install new light gray three-tab asphalt shingle roof.  Please see attached.		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

  
 \_\_\_\_\_                      1/24/18  
 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](mailto: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.*

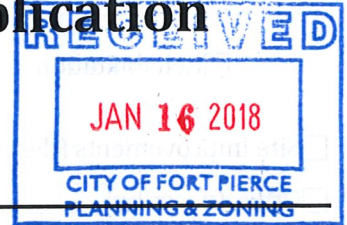
Provided to:	Name/Address	Via
Owner	James Frisk 826 Atlantic Avenue Fort Pierce, FL 34950	E-Mail <a href="mailto:Denverjf123@gmail.com">Denverjf123@gmail.com</a>
Other	Paul Thomas, CFP Building Administrator Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



Bldg. Permit # \_\_\_\_\_

COA# 18-05

## Certificate of Appropriateness Application



### Building & Site Information

Address of the Site: 826 Atlantic Ave

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): James Frisk

Mailing Address: 826 Atlantic Ave

Phone Number(s): 303-523-7051 Email: denverjfrisk@gmail.com

Applicant  
Name(s): (SAME)

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

[Signature]  
Signature of Owner

1-15-18  
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: Replace roof with light gray 3 Tab asphalt shingle. Roof is currently leaking due to hurricane.

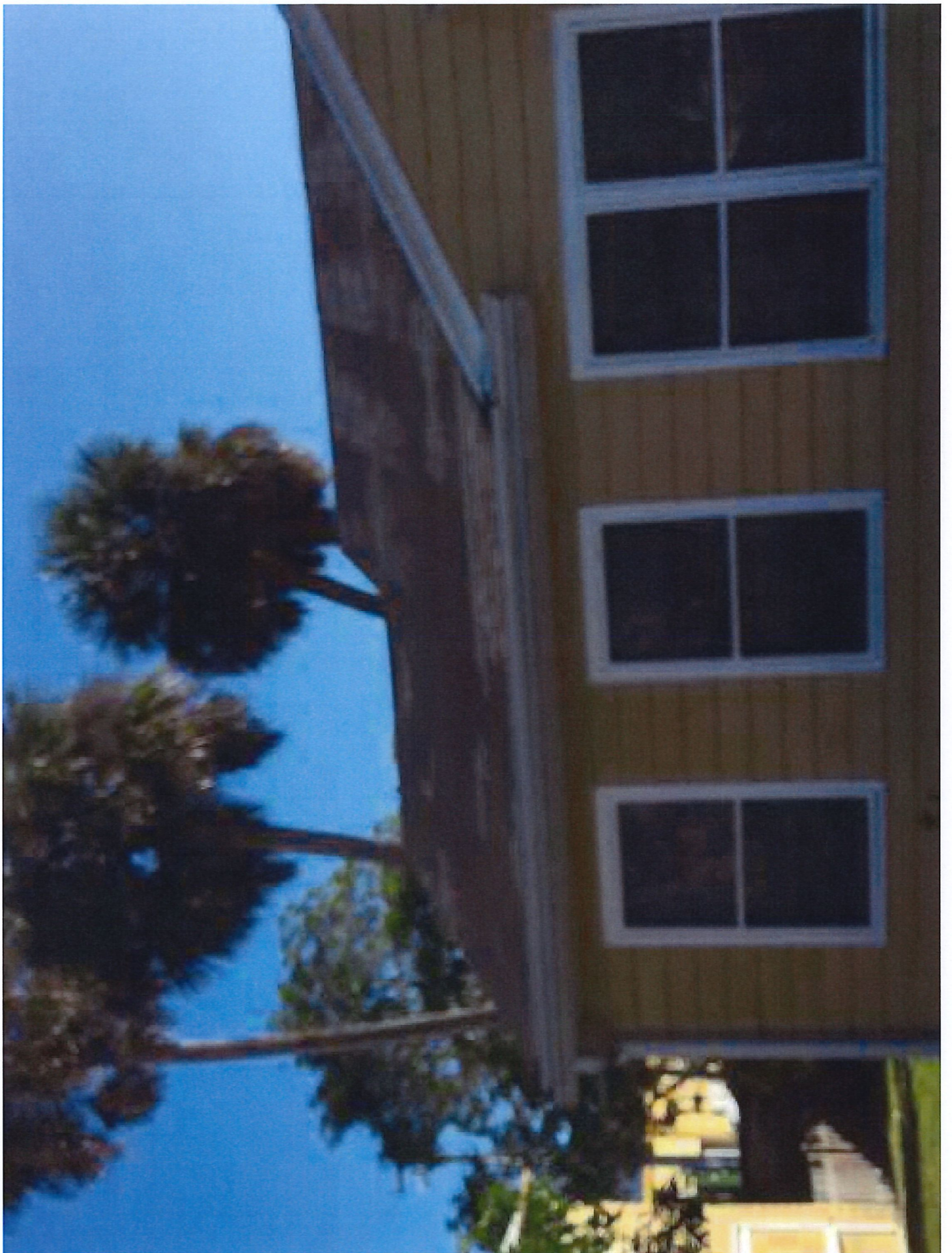
Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

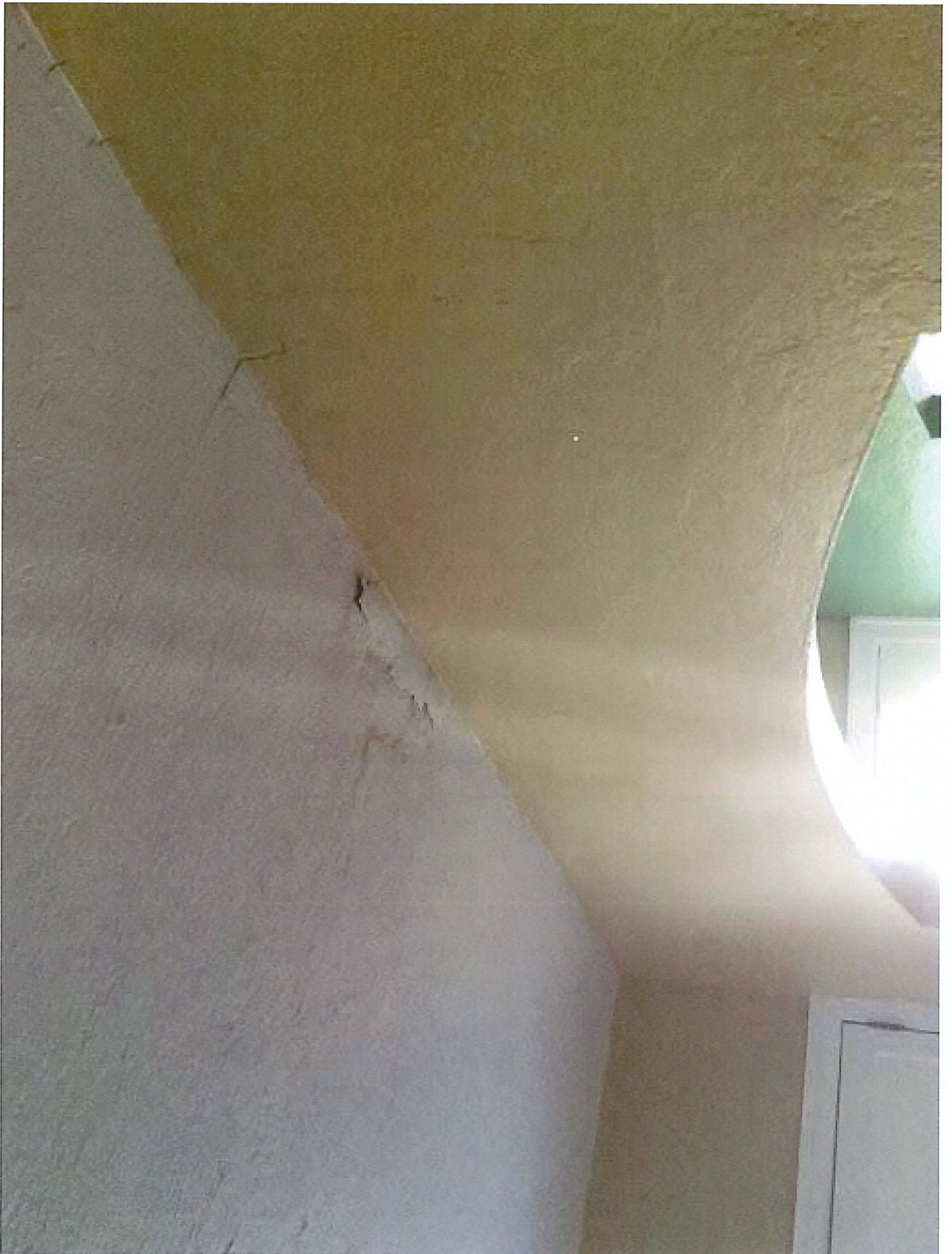
Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

**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.

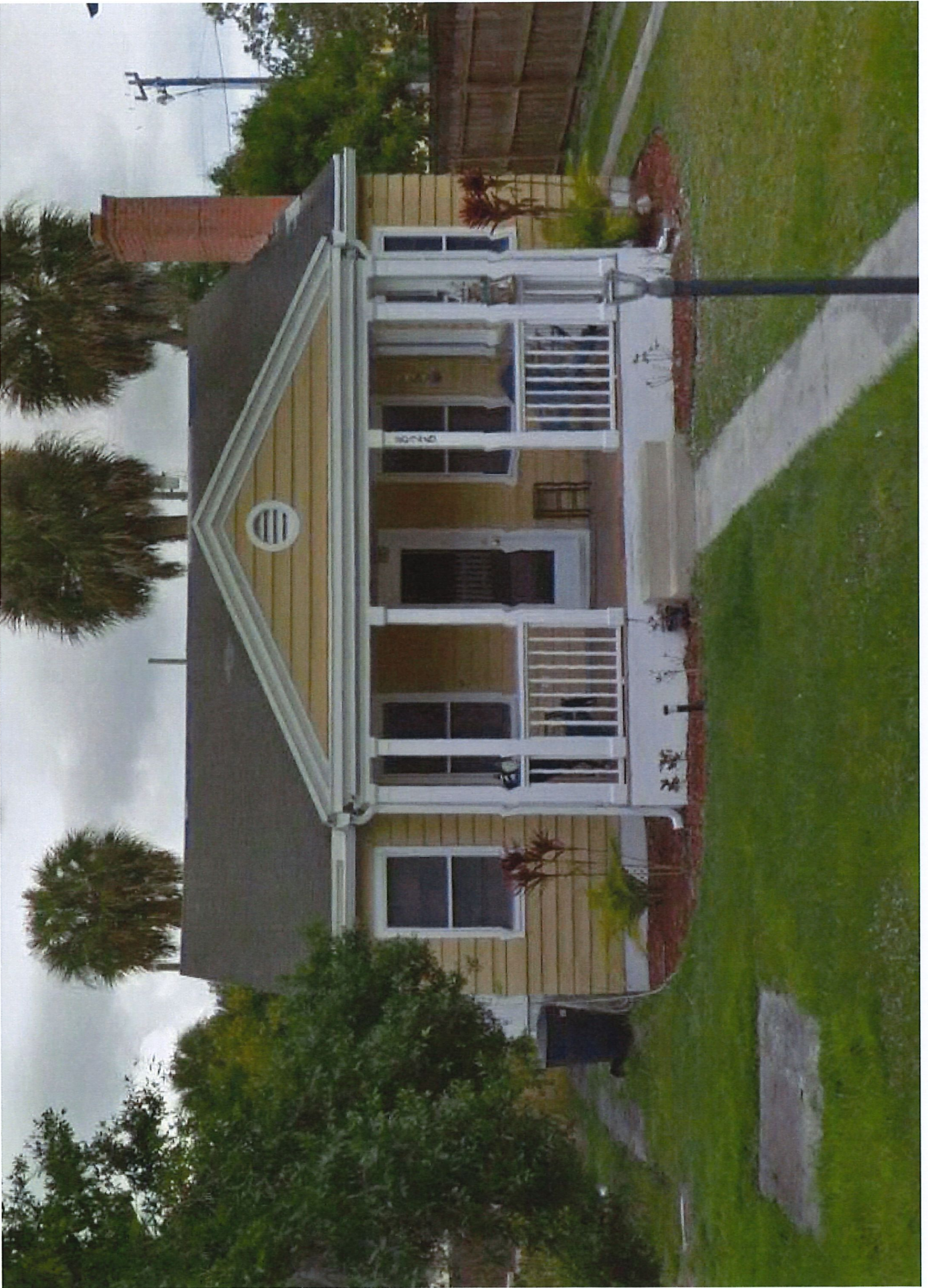


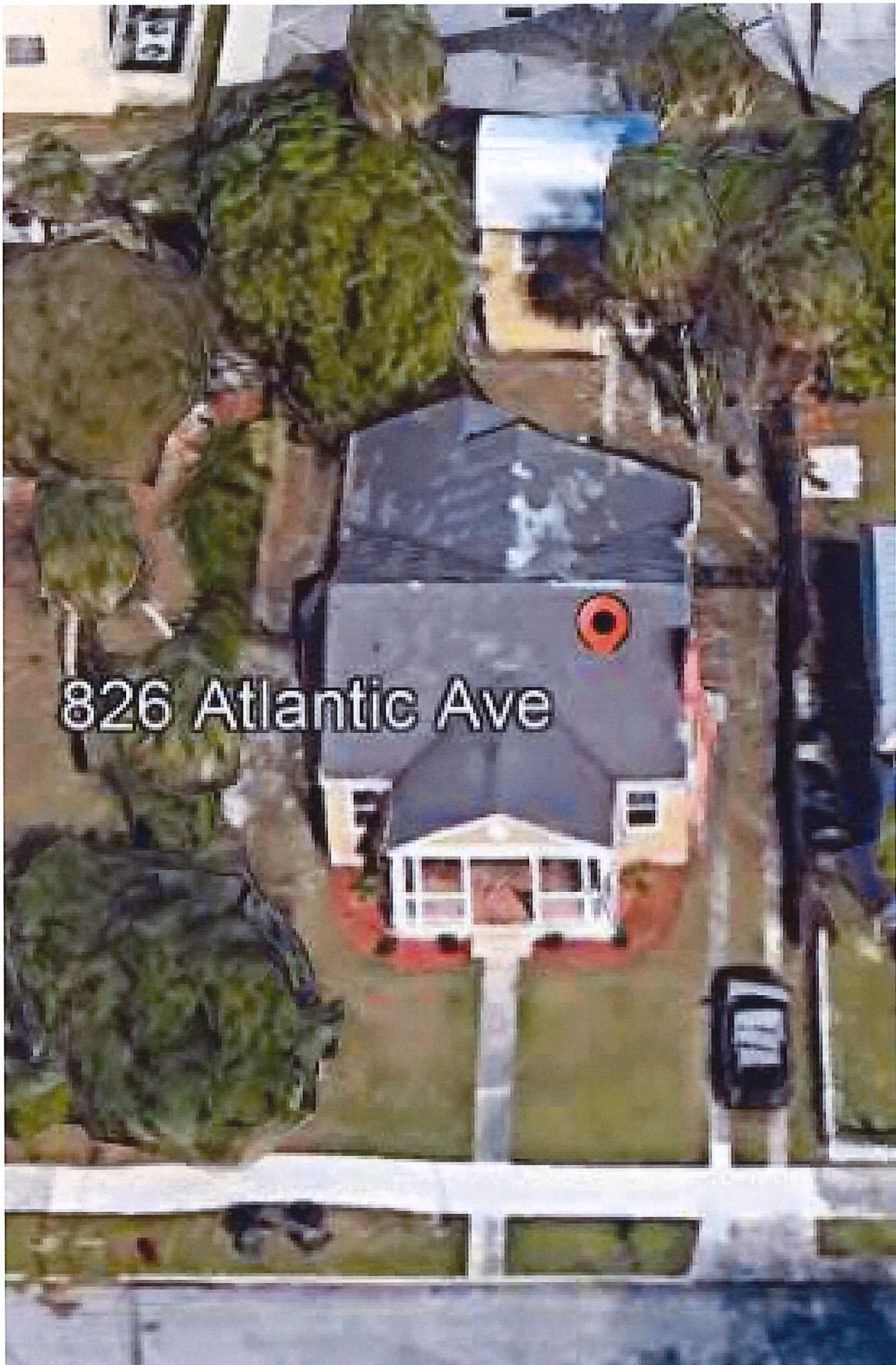












826 Atlantic Ave



Bldg. Permit # \_\_\_\_\_

COA# 18-08



# 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: 907 Citrus Ave, Ft Pierce, FL 34950

Parcel ID #: 2410-706-0079-000-6

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): Shane Mulgrew

Mailing Address: 2695 Columbia Trl, Loveland, OH 45140

Phone Number(s): 513 774 9515 Email: \_\_\_\_\_

**Applicant**  
Name(s): Master Craft Aluminum

Mailing Address: 1634 SE Niemeyer Cir, Port St Lucie, FL 34952

Phone Number(s): 772-335-1177 Email: mastercraftaluminum@gmail.com

**Representative**  
Name(s): Jeff Jackman

Mailing Address: 1634 SE Nimeyer Cir, Port St Lucie, FL 34952

Phone Number(s): 772-335-1177 Email: mastercraftaluminum@gmail.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, Daria Ryan P.O.A as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Daria Ryan P.O.A  
Signature of Owner

1/16/18  
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) Installing front and rear doors on the home.

Other (describe) \_\_\_\_\_

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

Installing front and rear doors on the home.

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.

Opening

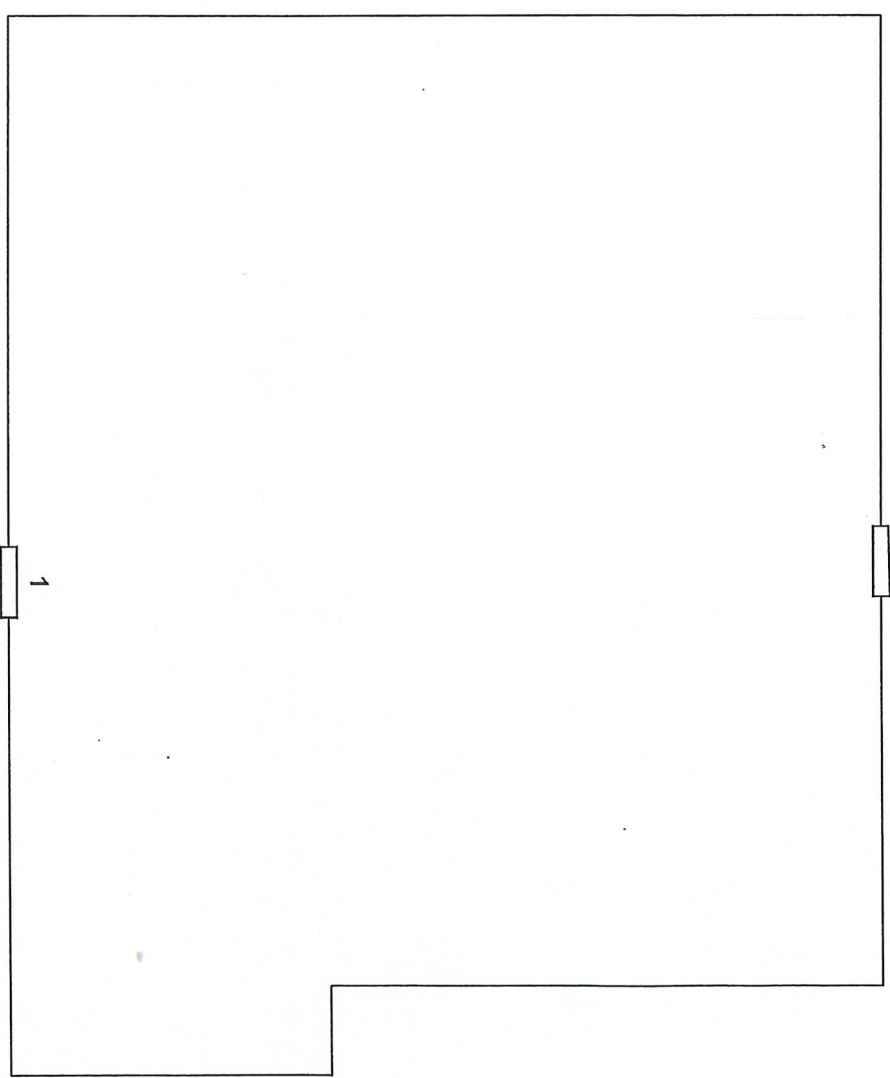
Size  
(W x H)

- 1. (Front Door) 36 x 80
- 2. (Back Door) 36 x 80

CITY OF FORT PIERCE

Reviewed: \_\_\_\_\_

Date: \_\_\_\_\_



Shane Mulgrew

807 Cirus Ave  
Ft Pierce, FL 34950

COPYRIGHT FEMWEST.COM

SCALE: NOT TO SCALE

DATE: Jan 08, 2018

PAGE DESCRIPTION: Site Plan

PAGE: 1 OF 1

# plastpro

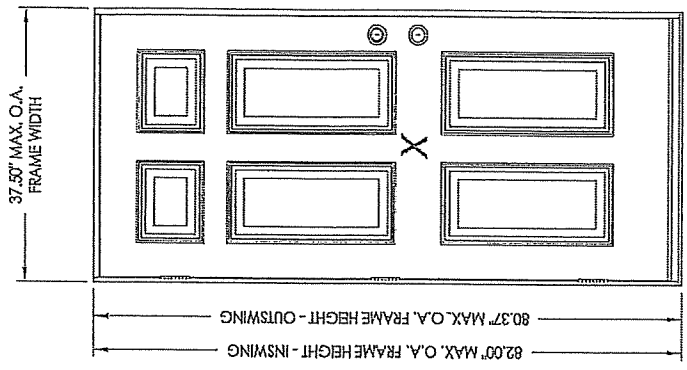
5200 W. CENTURY BLVD.  
LOS ANGELES, CA 90045

**Smooth / Wood Grain / White Wood Grain  
Rustic / Mahogany  
Series Fiberglass Door  
INSWING / OUTSWING  
"IMPACT"**

**GENERAL NOTES**

- This product has been evaluated and is in compliance with the 6th Edition (2017) Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
- Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
- When used in areas requiring wind borne debris protection this product complies with FBC Sections 1609.1.2 & R301.2.1.2 and does not require an impact resistant covering. This product meets missile level "D" and includes Wind Zone 4 as defined in ASTM E1996 and FBC Sections 1609.1.2.2 & R301.2.1.2.1.
- For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
- Site conditions that deviate from the details of this drawing require further engineering analysis by a licensed engineer or registered architect.

TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	Typical elevation, design pressures, & general notes
2	Door panel details
3	Horizontal cross sections
4	Vertical cross sections
5	Buck and frame anchoring - 2x buck masonry construction
6	Frame anchoring - 1x buck masonry construction
7	Bill of materials & components



SWING	OVERALL FRAME DIMENSION	DESIGN PRESSURE (PSF)	
		POSITIVE	NEGATIVE
INSWING	37.50' x 82.00"	+65.0	-70.0
OUTSWING	37.50' x 80.37"	+65.0	-65.0

October 19, 2017

Documents Prepared By: Lyndon F. Schmidt  
P.E. No. 43409

FLORIDA PROFESSIONAL ENGINEER  
L.F. SCHMIDT  
No. 43409  
\* LICENSE \*

BUILDING CONSULTANTS, INC.  
P.O. Box 230, Vero Beach, FL 33595  
Phone No. 813.559.9197  
FBE O.A. No. 9813

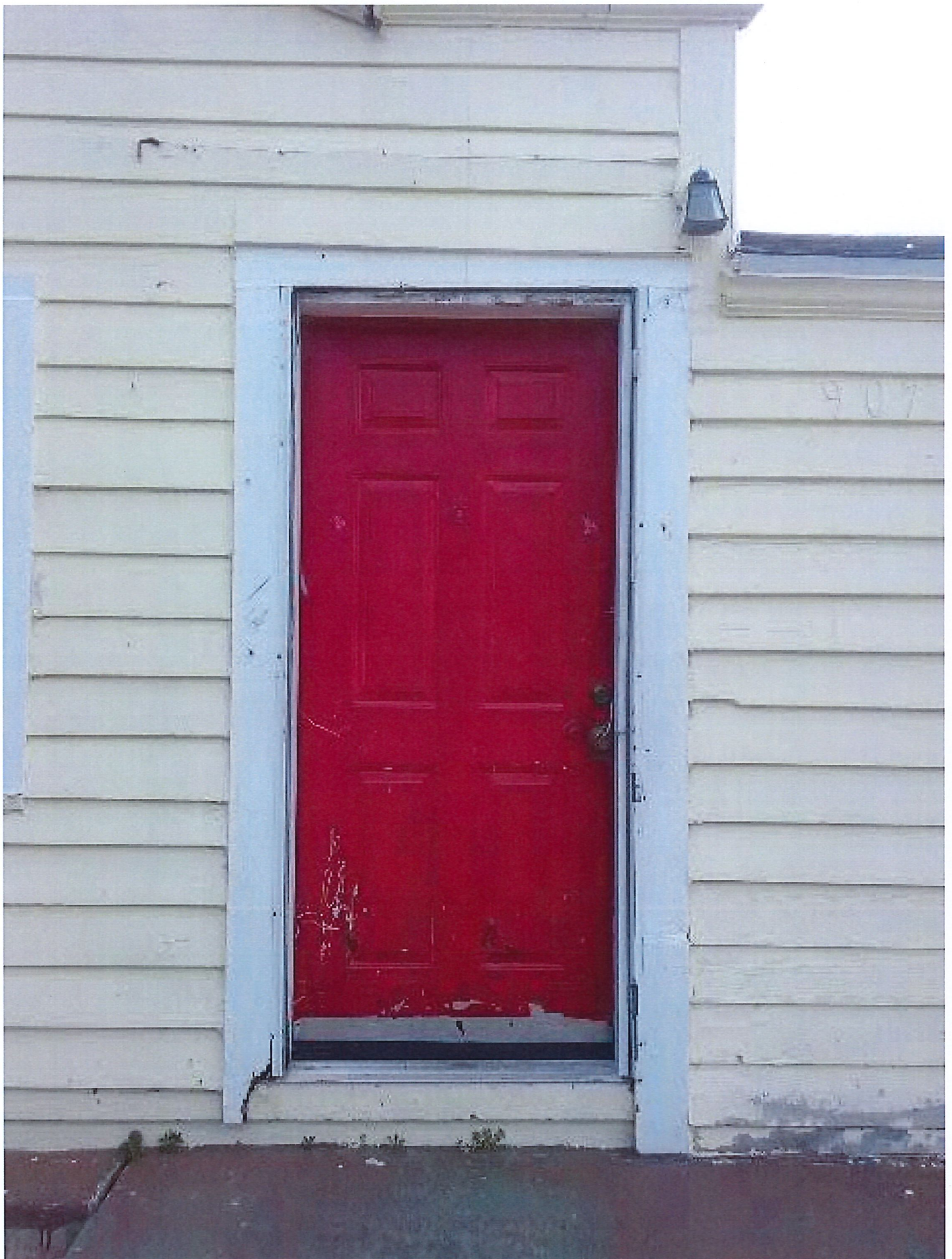
PRODUCT: PLASTPRO INC. FIBERGLASS DOOR

PART OR ASSEMBLY: TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES

NO.	DATE	REVISIONS
1	04/22/16	UPDATE TO 5TH ED. (2014) FBC
2	10/19/17	UPDATE TO 6TH ED. (2017) FBC

DATE: 02/16/12  
SCALE: N.T.S.  
DWG. BY: JK  
CHK. BY: LFS  
DRAWING NO.: FL-15213.1  
SHEET 1 OF 7









Bldg. Permit # \_\_\_\_\_

COA# 18-09



# 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: 725 AVENUE D  
Parcel ID #: 2410-601-0197-000-7  
Type of Designation:  Contributing  Non-contributing Site within the LINCOLN PARK Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

#### Property Owner/ Applicant Information

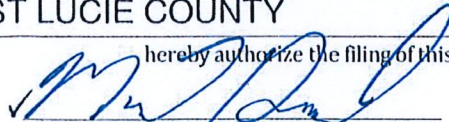
Property Owner(s) Name(s): ST LUCIE COUNTY  
Mailing Address: 2300 VIRGINIA AVE, FT PIERCE FL 34982  
Phone Number(s): 772-216-1667 Email: RGONZALEZ@COASL.COM

Applicant Name(s): J.A. TAYLOR ROOFING INC  
Mailing Address: 302 MELTON DR, FT PIERCE FL 34982  
Phone Number(s): 772-466-4040 Email: NADINE@JATAYLORROOFING.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, ST LUCIE COUNTY as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

  
Signature of Owner

01/16/18  
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) RE-ROOF

Other (describe) \_\_\_\_\_

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

TEAR OFF TILE, RE-NAIL DECK TO CURRENT BUILDING CODES. INSTALL SANTA FE TILE ROOF SYSTEM (5 COLOR BLEND) OVER OWENS CORNING SELF-ADHERED UNDERLAYMENT.

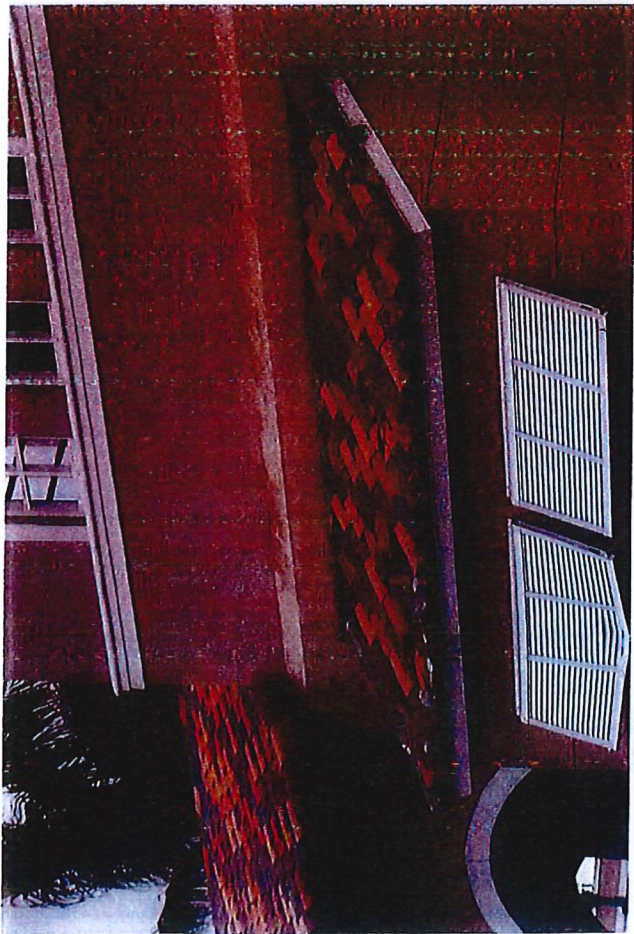
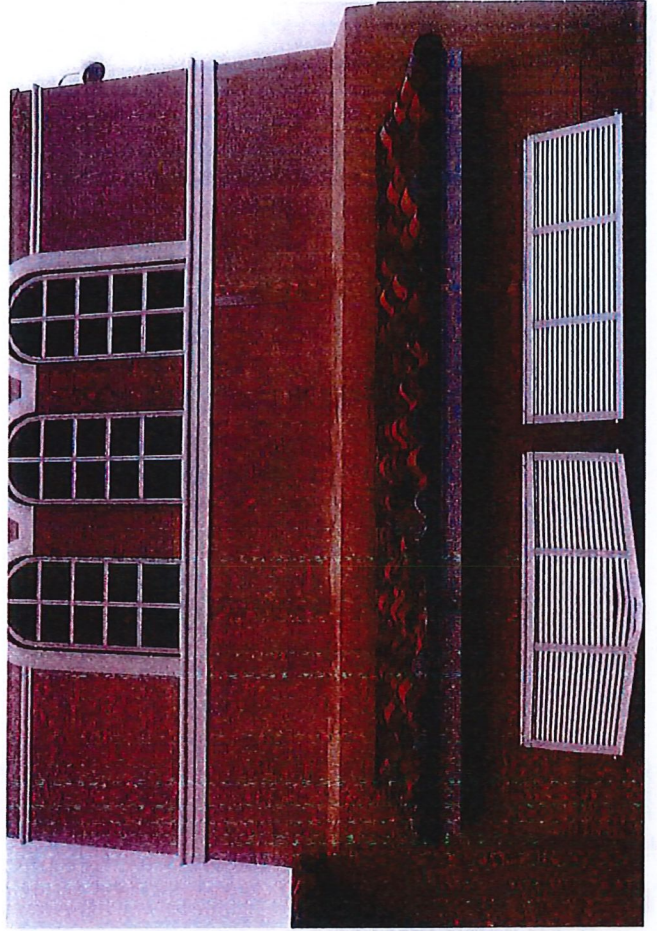
Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

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

**Application Requirements**

- \$10.00 Application fee
  - Site Plan with dimensions.
  - Survey (New Construction)
  - 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.





**5. LABELING**

5.1 All tiles shall bear the imprint or identifiable marking of the manufacturer's name or logo as shown below, or following statement: "Miami-Dade County Product Control Approved".

# SANTA FE TM MADE IN COLOMBIA

LABEL FOR SANTA FE SPANISH "S" CLAY ROOF TILE

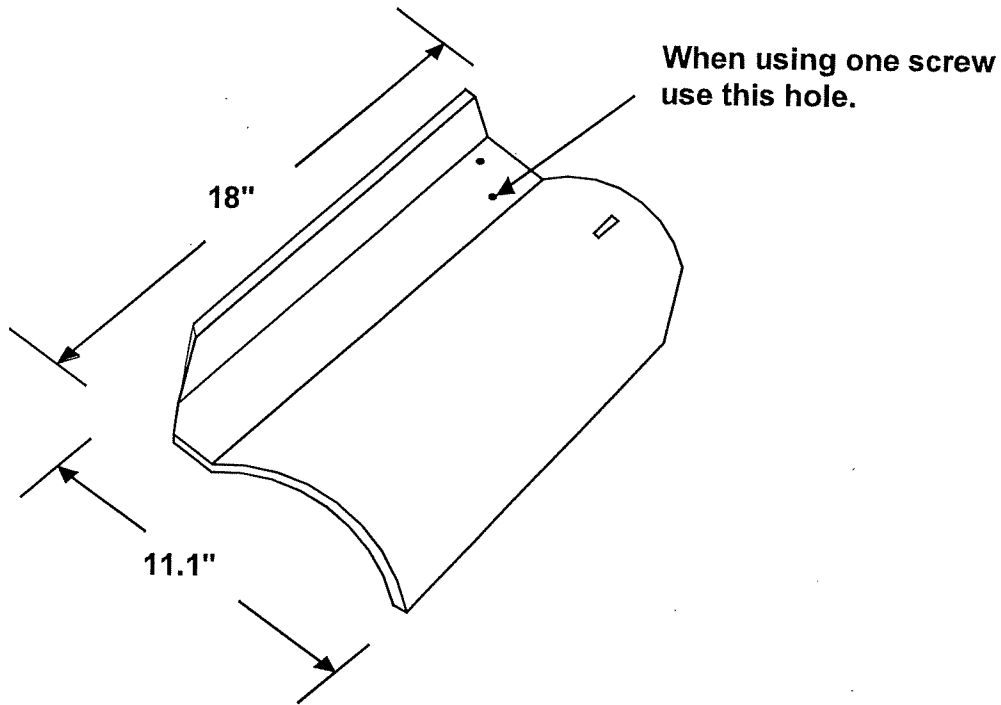
**6. BUILDING PERMIT REQUIREMENTS**

6.1 Application for building permit shall be accompanied by copies of the following:

6.1.1 This Notice of Acceptance.

6.1.2 Any other documents required by the Building Official or applicable building code in order to properly evaluate the installation of this system.

**PROFILE DRAWING**



"SANTAFÉ S" CLAY ROOF TILE

END OF THIS ACCEPTANCE



NOA No.: 15-0915.09  
Expiration Date: 02/01/21  
Approval Date: 01/21/16  
Page 5 of 5





THE SUNRISE CITY  
**FORT PIERCE**  
PLANNING DEPARTMENT *Florida*



Bldg. Permit # \_\_\_\_\_

COA# 18-11

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: \_\_\_\_\_

100 AVENUE A

Parcel ID #: \_\_\_\_\_

2410-503-0048-000-7

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): \_\_\_\_\_

ADAMS RANCH INC.

Mailing Address: \_\_\_\_\_

P.O. BOX 12909, FT. PIERCE, FL. 34979

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

Applicant

Name(s): \_\_\_\_\_

ADAMS RANCH INC

Mailing Address: \_\_\_\_\_

P.O. BOX 12909 FT. PIERCE, FL. 34979

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

Representative

Name(s): \_\_\_\_\_

ADELE KING - PROPERTY MANAGER

Mailing Address: \_\_\_\_\_

100 AVENUE A 1H FT. PIERCE FL. 34950

Phone Number(s): \_\_\_\_\_

772-332-8668 Email: adeleking@fpiercecommercial

*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, \_\_\_\_\_

ADAMS RANCH, INC

as Owner(s) of the subject property, do

hereby authorize the filing of this application on my/our behalf.

Michael L. [Signature] Pres.

Signature of Owner

1/24/18  
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) painting, repairing front facia + front,

Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: during repairs to front of building, we have a scaffolding company building the scaffold on the front porch. The porch shingles must be removed to accomodate the scaffold. The roofer will be replacing the shingles that have been removed.

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

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



Salon  
Bangz

[www.salonbangz.com](http://www.salonbangz.com)

Salon  
Bangz

772-489-0910



FREEDOM BOAT CLUB UPSTAIRS

ALISON LEFFEW ATTORNEY AT LAW 772-166-4678