

## **Administrative Certificates of Appropriateness**

Attached are Certificates of Appropriateness issued administratively in February 2018.

- COA #18-12, 300 Orange Avenue – New Signs
- COA #18-13, 523 N 13<sup>th</sup> Street – Roof Replacement
- COA #18-15, 225 Orange Avenue and 106 Depot Drive – Exterior Paint
- COA #18-16, 701 Orange Avenue – Fence
- COA #18-17, 464 N 9th Street – Roof and Doors Repair
- COA #18-18, 701 N Indian River Drive – Soffit Repair
- COA #18-19, 903 Citrus Avenue – Storm Shutters
- COA #18-20, 411 Cedar Place – Custom Shed
- COA #18-21, 725 Avenue D – Façade Sign



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

COA#18-12     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 300 Orange Avenue

Contributing     Non-Contributing     Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Install two (2) new signs (dimensional extra letters) on the south and west building walls.  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

2/07/18

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	City of Fort Pierce 100 N US Hwy 1 Fort Pierce, FL 34950	E-Mail <a href="mailto:jmcdermott@city-ftpierce.com">jmcdermott@city-ftpierce.com</a>
Applicant	Flamingo Signs 4444 SE Commerce Stuart, FL 34997	E-Mail <a href="mailto:flamingosigns@aol.com">flamingosigns@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



COA# 18-12

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

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 300 Orange Avenue  
Parcel ID #: 2410-503-0090-000-6  
Type of Designation:  Contributing  Non-contributing Site within the Downtown Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

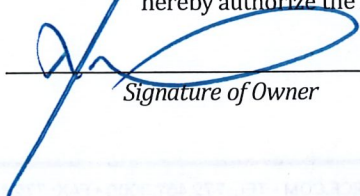
Property Owner(s) Name(s): City of Fort Pierce  
Mailing Address: 100 N. US Hwy 1, Fort Pierce, FL 34950  
Phone Number(s): 772-467-3000 Email: jmcdermott@city-ftpiece.com

Applicant Name(s): Flamingo Signs  
Mailing Address: 4444 SE Commerce, Stuart, FL 34997  
Phone Number(s): 772-220-7377 Email: flamingosigns@aol.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, Nicholas C. Mimms, City Manager as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

  
\_\_\_\_\_  
Signature of Owner

2/8/18  
\_\_\_\_\_  
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: \_\_\_\_\_

Dimensional extra letters installed on the south and west building walls

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.

3/4" ROUTED & PAINTED EXTRA LETTERING STUD MOUNTED TO SOUTH BUILDING WALL



60 FT BUILDING HEIGHT

LOCATION:  
SUNRISE CENTER  
300-310 ORANGE AVE.  
FORT PIERCE, FL 34950

BUILDING FRONTAGE = 120 FT - BUILDING HEIGHT = 60 FT  
120' x 60' x .20 = 1440 SQ FT ALLOWED TO CODE  
SOUTH WALL SIGNAGE = 32" x 480" = 106 SQ FT  
WEST WALL SIGNAGE = 15" x 182" = 18.9 SQ FT  
TOTAL SIGNAGE = 124.9 SQ FT

CONTRACTOR:  
CITY OF FORT PIERCE  
PUBLIC WORKS DEPT.

PAUL WELCH INC.  
MECH-ELECT-CIVIL ENG.  
1984 BILTMORE ST. #114  
PORT SAINT LUCIE, FL 34984  
PAUL WELCH P.E.  
FLA REG NO.29945

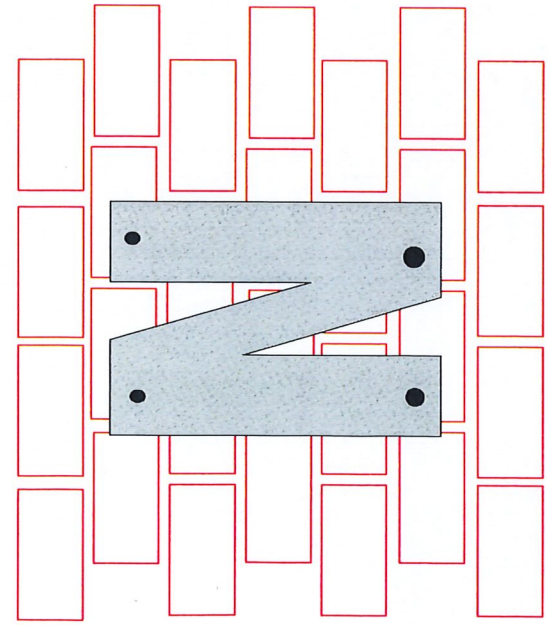
DEC 0 3 2017

APPROVED  
Reviewed by: *[Signature]*  
Date: 2/6/18  
Planning & Zoning Dept

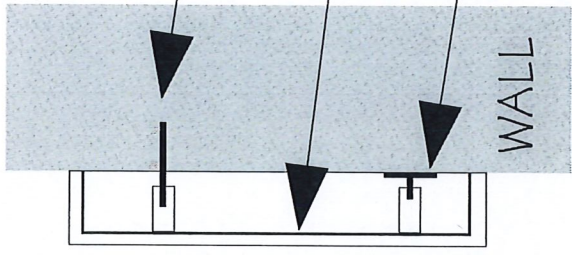
# "TYPICAL" STUCCO OR BRICK SURFACE INSTALLATION OF INDIVIDUAL LETTERS (COMBINATION STUDS TOP & PAD BOTTOM MOUNT)

CITY OF FORT PIERCE  
Planning & Zoning Dept  
APPROVED  
Reviewed by: *Leah...*  
Date: 2/5/18

DEC 0 3 2017



FRONT VIEW



SIDE VIEW

- THOROUGHLY CLEAN THE SURFACE IN THE AREA OF THE PADS.
- TAPE LETTERS IN PLACE (WITHOUT STUDS INSTALLED) USING THE SPACING TEMPLATE. REMOVE ONE LETTER AT A TIME, INSTALL STUD AND REPOSITION LETTER, BANGING INTO PLACE OR INKING STUD TO MARK HOLE FOR DRILLING. OR MAKE A FULL STUD MOUNTING TEMPLATE.
- DRILL 1/4" HOLES, 1 1/2" DEEP (AND REMOVE PATTERN IF USED)
- DUST OUT HOLES AND USING A WIRE BRUSH CLEAN SURFACE WHERE THE PADS ARE TO BE ADHERED.
- FILL HOLES WITH SILICONE AND APPLY SILICONE TO PADS.
- INSERT LETTERS AND PRESS PADS INTO PLACE.

PAUL WELCH INC.  
MECH-ELECT-CIVIL ENG.  
1984 BILTMORE ST. #114  
PORT SAINT LUCIE, FL 34984  
PAUL WELCH P.E.  
FLA REG NO. 29945

LETTER COLOR: GREEN  
LETTER MATERIAL: 1/2" & 3/4" PAINTED EXTRA

LOCATION:  
SUNRISE CENTER  
300-310 ORANGE AVE.  
FORT PIERCE, FL 34950

LETTER COLOR: GREEN  
LETTER MATERIAL: 1/2" & 3/4" PAINTED EXTRA

1/2" ROUTED & PAINTED EXTRA LETTERING STUD MOUNTED TO SOUTH BUILDING WALL



LOCATION:  
SUNRISE CENTER  
300-310 ORANGE AVE.  
FORT PIERCE, FL 34950

BUILDING FRONTAGE = 120 FT BUILDING HEIGHT = 60 FT  
120' x 60' x .20 = 1440 SQ FT ALLOWED TO CODE  
SOUTH WALL SIGNAGE = 32" x 480" = 106 SQ FT  
WEST WALL SIGNAGE = 15" x 182" = 18.9 SQ FT  
TOTAL SIGNAGE = 124.9 SQ FT

CONTRACTOR:  
CITY OF FORT PIERCE  
PUBLIC WORKS DEPT.

CITY OF FORT PIERCE  
Planning & Zoning Dept

APPROVED

Reviewed by: *[Signature]*

Date: *2/15/18*

60 FT BUILDING HEIGHT

32 in

480 in

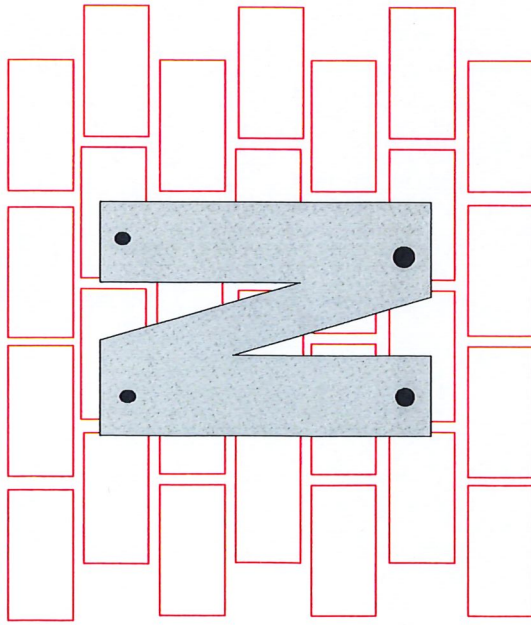
The Sunrise Center

120' FRONTAGE

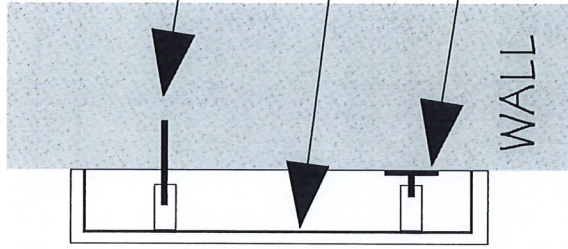
DEC 0 3 2017

PAUL WELCH INC.  
MECH-ELECT-CIVIL ENG.  
1984 BILTMORE ST. #114  
PORT SAINT LUCIE, FL 34984  
PAUL WELCH P.E.  
FLA REG NO.29945

# "TYPICAL" STUCCO OR BRICK SURFACE INSTALLATION OF INDIVIDUAL LETTERS (COMBINATION STUDS TOP & PAD BOTTOM MOUNT)



FRONT VIEW



STUDS ONLY TOP (MINIMUM 2 STUDS PER LETTER).  
CLEAR SILICONE APPLIED IN DRILLED HOLES.  
1/4" x 2" GALVANIZED STUD

BALANCE PAD  
CLEAR SILICONE APPLIED BETWEEN PAD & WALL

SIDE VIEW

- THOROUGHLY CLEAN THE SURFACE IN THE AREA OF THE PADS.
- TAPE LETTERS IN PLACE (WITHOUT STUDS INSTALLED) USING THE SPACING TEMPLATE. REMOVE ONE LETTER AT A TIME, INSTALL STUD AND REPOSITION LETTER, BANGING INTO PLACE OR INKING STUD TO MARK HOLE FOR DRILLING.  
OR MAKE A FULL STUD MOUNTING TEMPLATE.
- DRILL 1/4" HOLES, 1 1/2" DEEP (AND REMOVE PATTERN IF USED)
- DUST OUT HOLES AND USING A WIRE BRUSH CLEAN SURFACE WHERE THE PADS ARE TO BE ADHERED.
- FILL HOLES WITH SILICONE AND APPLY SILICONE TO PADS.
- INSERT LETTERS AND PRESS PADS INTO PLACE.

CITY OF FORT PIERCE  
Planning & Zoning Dept  
APPROVED  
Reviewed by: *[Signature]*  
Date: *2/25/18*

LETTER COLOR:  
GREEN  
LETTER MATERIAL:  
1/2" & 3/4" PAINTED EXTRA

LOCATION:  
SUNRISE CENTER  
300-310 ORANGE AVE.  
FORT PIERCE, FL 34950

PAUL WELCH INC.  
MECH-ELECT-CIVIL ENG.  
1984 BILTMORE ST. #114  
PORT SAINT LUCIE, FL 34984  
PAUL WELCH P.E.  
FLA REG NO. 29945



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

COA#18-13     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 523 N 13<sup>th</sup> Street

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Replace roof (remove old asphalt shingles and install new asphalt shingles).  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, MCP                      2/12/18  
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	Neighborhood Bibleway Revival Cen Inc P.O. Box 371 Fort Pierce, FL 34954	E-Mail
Applicant	Roderick Waller P.O. Box 13492 Fort Pierce, FL	E-Mail <a href="mailto:Rodwaller1@gmail.com">Rodwaller1@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# 18-13

# Certificate of Appropriateness Application



## Building & Site Information

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

523 N 13th

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

2409-502-0008-000-8

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

Neighborhood Bikeway Revival

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

Po Box 371 Fort Pierce 34954

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

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

Applicant

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

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

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

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

Representative

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

Rodwaller

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

Po Box 13492

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

772 201 2850

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

Rod Waller  
Signature of Owner

2/9/18  
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:

*Remove shingles and*

*Replacing with Like Shingles*

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.



J.B. MEMORIAL

J.B. MONTELEONE INC.

1528







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

COA#18-15     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 225 Orange Avenue and 106 Depot Drive

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Exterior painting of the commercial buildings  Colors to be used: "Mint Condition" – buildings "White" – trim/accents  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

  
 \_\_\_\_\_                      02/15/18  
 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.*

Owner/Applicant	Kristina Gibbons 4315 Thousand Pines Dr. Fort Pierce, FL 34981	E-Mail <a href="mailto:varsitysportsshop@gmail.com">varsitysportsshop@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# 18-15

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 225 Orange Ave # 106 Depot Dr.

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): Kristina Gibbons

Mailing Address: 4315 Thousand Pines Dr. Ft. Pierce, FL 34981

Phone Number(s): 772 370 5140 Email: varsitysportsshop@gmail.com

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

Kristina Gibbons  
Signature of Owner

2/14/18  
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) Paint exterior of Building

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

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

Paint Building in "MINT CONDITION" SW 6743 w/ white trim/Accents

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.

SW 6743  
Mint Condition

153-C1

PLEASE CONTACT THE BUREAU AT THE ADDRESS LISTED BELOW

JULY 20 19 50

UNIVERSITY OF MICHIGAN LIBRARIES

ANN ARBOR MI 48106

ACQUISITION SERVICES DIVISION

300 N ZEEB DR

ANN ARBOR MI 48106

UNIVERSITY MICROFILMS  
SERIALS ACQUISITION



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

COA#18-16     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address 701 Orange Avenue  
 Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Remove an existing 6 feet tall chain link fence on east and south sides of property and replace it with a four feet tall white picket fence. Install a new 4 feet tall white picket fence on west property line.  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

  
 \_\_\_\_\_                      2/23/18  
 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.*

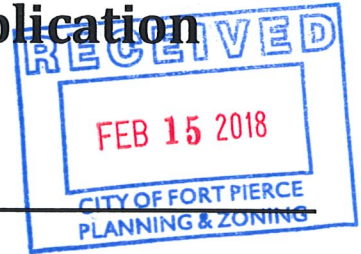
Provided to:	Name/Address	Via
Owner	701 Orange Ave. LLC 1221 Delaware Ave Fort Pierce, FL 34950	E-Mail <a href="mailto:tridentproperty@bellsouth.net">tridentproperty@bellsouth.net</a>
Applicant	Michael Broderick 1127 Granada St. Fort Pierce, FL 34949	E-Mail <a href="mailto:tridentproperty@bellsouth.net">tridentproperty@bellsouth.net</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# 18-16

## Certificate of Appropriateness Application



### Building & Site Information

Address of the Site: 701 Orange Ave.  
Parcel ID #: 2410-703-0004-000-1  
Type of Designation:  Contributing  Non-contributing Site within the PAD Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s) Name(s): 701 Orange Ave. LLC  
Mailing Address: 1221 Delaware Ave. Ft. Pierce Fl. 34950  
Phone Number(s): 561-719-3356 Email: \_\_\_\_\_

Applicant Name(s): Michael Broderick  
Mailing Address: 1127 Granada St. Ft. Pierce Fl. 34949  
Phone Number(s): 561-719-3356 Email: tridentproperty@bellsouth.net

Representative Name(s): Michael Broderick  
Mailing Address: 1127 Granada St. Ft. Pierce Fl. 34949  
Phone Number(s): 561-719-3356 Email: tridentproperty@bellsouth.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, 701 Orange Ave. LLC as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Signature of Owner

2/15/18  
Date

**Description of Requested Work**

Please indicate the type of work requested:

- |   |   |                                     |                                     |
|---|---|-------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> Fence | <input type="checkbox"/> Shed             | <input type="checkbox"/> Door(s)    | <input type="checkbox"/> Roof       |
| <input type="checkbox"/> Window(s)        | <input 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 6' tall chain link fence on east and south sides of property.

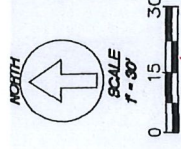
Replace with a 4' white picket fence. Install a new 4' white picket fence on west property line running from rear of building south to property line.

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

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.



**LEGAL DESCRIPTION:**  
 PLAT OF TOTTEN'S S/D LOTS 4 AND 5 AND N 1/2 FT OF VAC ALLEY ADJ C AND LOTS 6 AND 7 AND E 22 FT OF LOT 8 AND 5.5 FT OF VAC ALLEY ADJ N OF LOTS 6 AND 7 AND E 6 FT OF LOT 8  
 P.B. 5 PG 53 - AS RECORDED IN PUBLIC RECORDS SAINT LUCIE COUNTY CLERK OF COURTS, FLORIDA SECTION 10 TOWNSHIP 35 SOUTH RANGE 40 EAST 0.56 ACRES MORE OR LESS

**LEGEND**

- ROW - RIGHT-OF-WAY
- WPP - WOOD POWER POLE
- LB - LICENSED BUSINESS
- CL - CENTERLINE
- WM - WATER METER
- PG - PAGES
- MH - MANGHOLE
- MIR - FOUND IRON ROD & CAP
- FF - FINISH FLOOR
- P - PLAT
- AC - AIR CONDITIONING PAD
- IR - IRON ROD
- FP - POWER POLE
- FR - FOUND IRON ROD
- FND - FOUND
- D - DEED
- M - MEASURED
- PB - PLATBOOK
- ID - IDENTIFICATION
- IP - IRON PIPE
- VP - VICE PRESIDENT

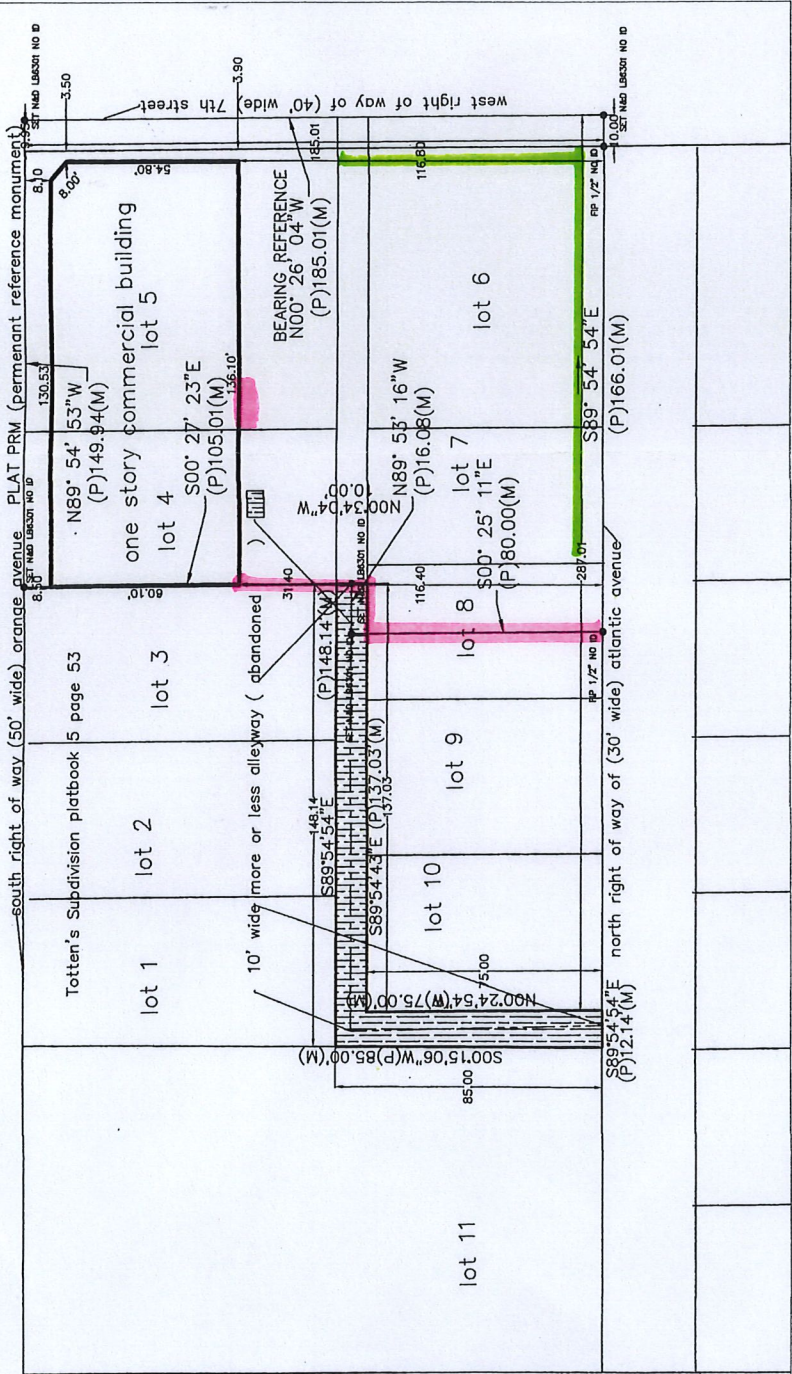
DATE OF SURVEY 05/16/2017  
 FIELD / DRAWN : SB/AB / SB  
 A.B. SURVEY SUPPLIES ENTERPRISES INC L.B. 6301  
 342 S.W. CARTER AVENUE, PORT SAINT LUCIE, FLORIDA  
 PHONE NUMBER: 772-579-3848; 772-267-0596  
 EMAIL: PRESIDENT: ABACCUS@COMCAST.NET EMAIL  
 VICE PRESIDENT: SEAN.BACCUS@MAIL.COM

REPRODUCTION OF THIS MAP AND A SHEETS ATTACHED ARE NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL RAISED SEAL OF A FLORIDA LICENSE SURVEYOR AND MAPPER.  
 AB SURVEY ENTERPRISES INC LB 6:  
 342 CARTER AVE, PSL, FL 34983  
 PHONE / FAX 772-224-2963  
 CELL 772-579-3849

I hereby certify that survey represented hereon was performed under my supervision and it complies with the minimum technical requirements of the Florida Board of Surveyors and Mappers in chapter 5J-17.050(10)(a)-(k) of the Florida administrative code, pursuant to section 472.027, Florida Statutes, and no other encroachments unless shown or noted.

Signature: *Stacy W. Wells* 5/17/17  
 DA

VP: STEVEN D MARSHALL LS 6376  
 PAGES OR SHEETS COVERED BY THIS SEAL



*- C HAWK LINK FENCE TO BE REMOVED AND REPLACES WITH PICKET FENCE*

*NEW WHITE PICKET FENCE TO BE INSTALLED*

**701 ORANGE AVENUE  
 PARCEL CONTROL NUMBER 1327-701-0091-000-3  
 SURVEY NOTES:**

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR RIGHTS-OF-WAY AND/OR EASEMENTS OF RECORD NO SEARCH OF PUBLIC RECORDS HAS BEEN DONE BY THIS OFFICE.
2. THIS SURVEY IS CERTIFIED ONLY TO THE NAMED INDIVIDUALS.
3. ELEVATIONS HEREON ARE ASSUMED ELEVATIONS IF SHOWN
4. LEGAL DESCRIPTION SUPPLIED BY CLIENT.
5. NO STRUCTURES THAT ARE ABOVE OR BENEATH THE SURFACE HAVE BEEN LOCATED OTHER THAN WHAT IS SHOWN HEREON.
6. BEARINGS SHOWN HEREON ARE CONFORMED TO PLAT UNLESS OTHERWISE NOTED.
7. BEARING REFERENCE CENTERLINE OF 7TH STREET AND BEARS N00°26'04\"/>

DATE: 05-16-2017  
 DRAWN BY: SB  
 APPROVED BY: SDM  
 SCALE: 1\"/>

SHEET NUMBER 1 OF 1  
 TITLE: BOUNDARY SURVEY  
 CLIENT: Bumwin Inc



*PROPOSED FENCE*



EAST SIDE



East side



*SOUTH SIDE*



*WEST SIDE*



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

COA#18-17     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 464 N 9<sup>th</sup> Street

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Roof and doors repair. Remove damaged by Hurricane Irma shingles and install new same type shingles.  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                      2/20/18  
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	Save Our Children Inc. P.O. Box 311 Fort Pierce, FL 34954	E-Mail <a href="mailto:kmills@saveourchildreninc.org">kmills@saveourchildreninc.org</a>
Applicant	Rev. Dr. Kenneth Mills Sr. 464 N 9 <sup>th</sup> Street Fort Pierce, FL 34950	E-Mail <a href="mailto:Pastorkennymills@aol.com">Pastorkennymills@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



# 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: 464 N 9th Street

Parcel ID #: 2410-601-0037-000-B

Type of Designation:

Contributing    Non-contributing   Site within the X Historic District

Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

#### Property Owner/ Applicant Information

Property Owner(s)

Name(s): Save our Children Inc

Mailing Address: PO Box 311 Fort Pierce, FL 34954

Phone Number(s): 772-370-3420 Email: Kmills@saveourchildreninc.org

772 466-8398 Fax. 772-466-8055

Applicant

Name(s): Rev. Dr. Kenneth Mills Sr.

Mailing Address: 464 N 9th St. Fort Pierce, FL 34950

Phone Number(s): 772 Email: pastorkennymills@aol.com

Representative

Name(s): Kenneth Mills Sr.

Mailing Address: P.O. Box 311 Ft. Pierce, FL 34954

Phone Number(s): 772-466-8398 Email: pastorkennymills@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, Kenneth Mills Sr. as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Kenneth Mills Sr.  
Signature of Owner

2-13-18  
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) Roof repairs from damage of Hurricane  
 Other (describe) Tama. Site Repair/replace 1 door to stop leaking water

Please provide a detailed description of the proposed work to be performed: We will repair the lower section of our roof that was damaged by hurricane Tama. With We need to seal 2 doors that is allowing water leakage. SHINGLES-SAME TYPE FOR SAME

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

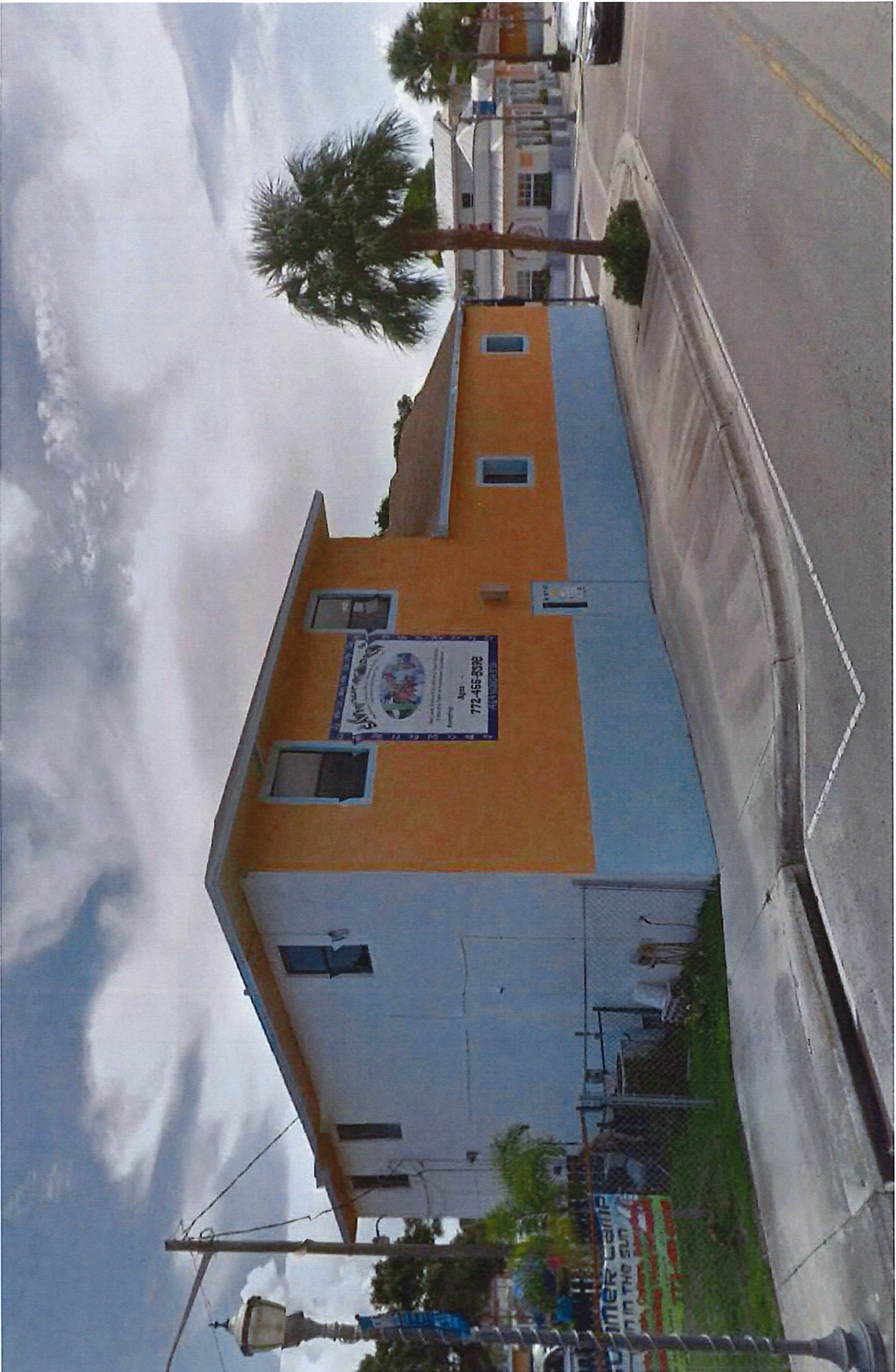
Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

**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.







Qq Pp Oo Nn Mm Ll Kk Jj Ii Hh Gg Ff Ee Dd Cc Bb Aa

# SAVE OUR CHILDREN

It's time to take a leadership role to raise a child  
who is ready for the future. Learning is fun.



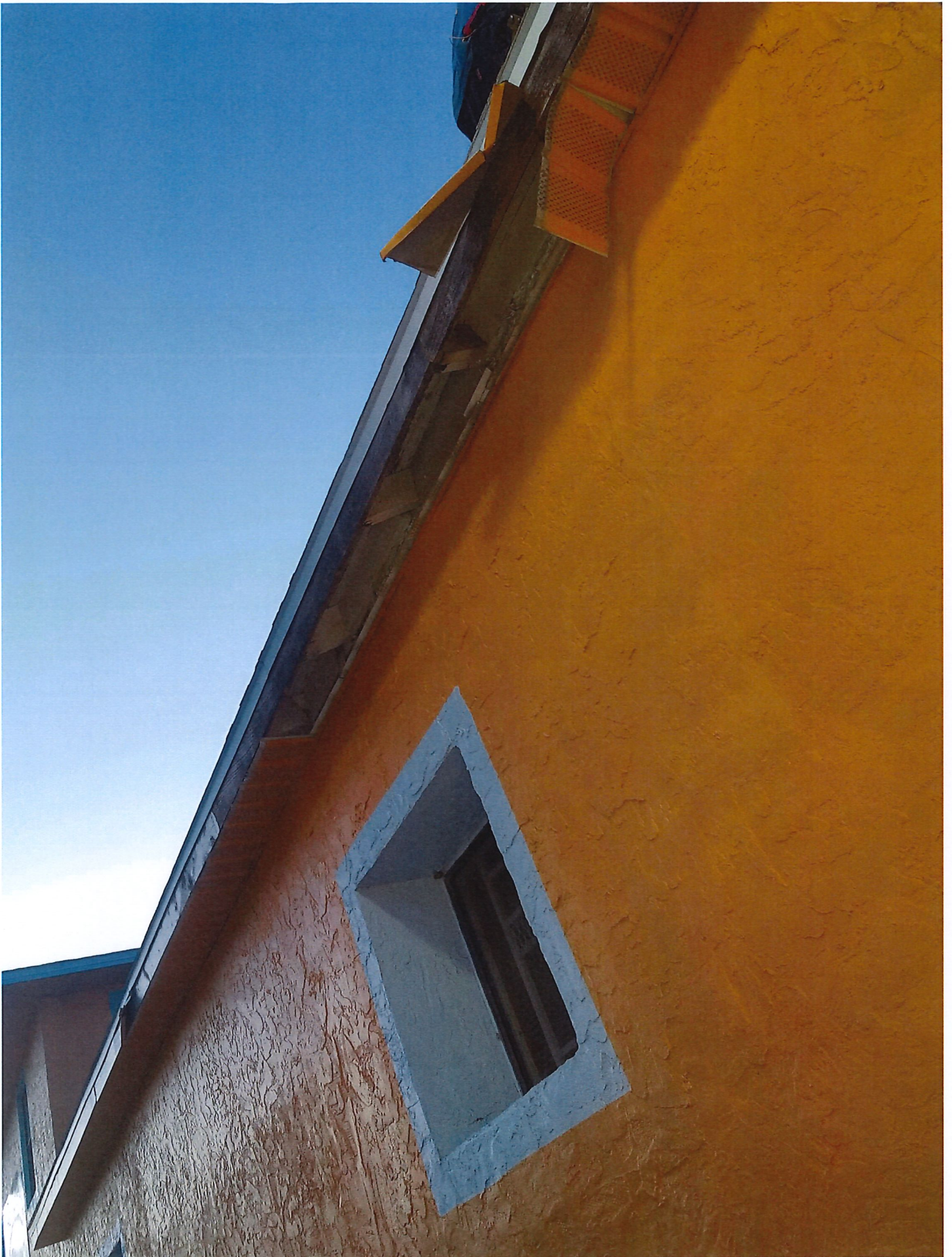
Move Forward to Helping Your Children  
Reach the Path of Academic Excellence

Ages 5-12  
786-466-8398

XX YY ZZ









CITY OF FORT PIERCE, FLORIDA  
BUILDING DEPARTMENT  
APPLICATION FOR BUILDING PERMIT  
(772) 467-3718 FAX (772) 467-3849  
building@city-ftpierce.com

PERMIT # 18 452  
FBC (2017) 6<sup>th</sup> Edition  
PIN # 833352

Building Department Project Manager:  
Shanna

\*Property Address 464 W 9th Street Ft. Pierce \*Date \_\_\_\_\_

Parcel ID# 2410-601-0037-000-8 \*# of plans submitted \_\_\_\_\_ \*# of CD's submitted \_\_\_\_\_  
(Located on your tax bill)

\*Owner Name Save our Children Inc \*Owner Address PO Box 311 Ft Pierce, FL 34984

Phone # (772) 370-5220 Fax # ( ) Cell # ( )

Email Address \_\_\_\_\_

**\*Required Information**

Type of permit Roof \*Valuation \$ 17,533.00

\*Description of Work: Shingle Roof removal and replacement on the first floor only, with flat roof @ 800 sqf.

Architect: NA

Phone ( ) Fax ( ) Email Address NA

Engineer: \_\_\_\_\_

Phone ( ) Fax ( ) Email Address \_\_\_\_\_

**\*CONTRACTOR/APPLICANT INFORMATION:**

City License # CCC1327225 State License # \_\_\_\_\_

Company Name Andros Construction Qualifier Lloyd M. Constant

Address 2706 Atlantic Ave City/State Ft. Pierce FL Zip 34947

Phone # ( ) Fax # ( ) Cell # ( )

Email Address AndrosConstruction@gmail.com

Occupancy Commercial Construction Type Roofing # of Units 1 # of Stories 1  
Sq. Ft. Conditioned Space 1,250 Total Sq. Ft. 1,250

I understand that no building may be occupied until a Certificate of Occupancy/Certificate of Completion has been issued after final inspection by the Building Department and full compliance with the building code, city ordinances, state statutes and other applicable rules and regulations have been satisfied. I am also verifying that all sets of plans submitted are identical.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, wells, pools, furnaces, boilers, heaters, tanks, and air conditioners etc.

Owner's Affidavit: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.



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

COA#18-18     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 701 N Indian River Drive  
 Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

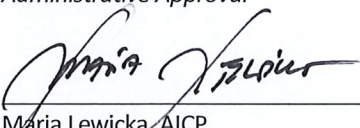
Request	Conditions	Applicable Standards
Repair and replace soffit damaged due to Hurricane Irma with vinyl material in white color same as existing soffit.  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

*Board Approval*

*Administrative Approval*

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

  
 \_\_\_\_\_                      2/21/18  
 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	Indian River Place Condo Association 701 N Indian River Drive Fort Pierce, FL 34950	E-Mail <a href="mailto:irp701@comcast.net">irp701@comcast.net</a>
Other	Paul Thomas, CFP Building Administrator Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



# 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: 701 N. Indian River Drive Fort Pierce 34950

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

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

### Property Owner/ Applicant Information

Property Owner(s)  
Name(s): Indian River Place Condo Association  
Mailing Address: 701 N. Indian River Drive Fort Pierce FL 34950  
Phone Number(s): 772 595-5223 Email: irp701@comcast.net

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, Wilma Pedra - IRP Bldg Manager as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

2/14/18  
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) Repair of soffits due to Hurricane Irma

Other (describe) Replace existing soffits with Vinyl material same color

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

Repair & Replace soffits damaged due to Hurricane Irma with Vinyl material in white same as existing soffits

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:

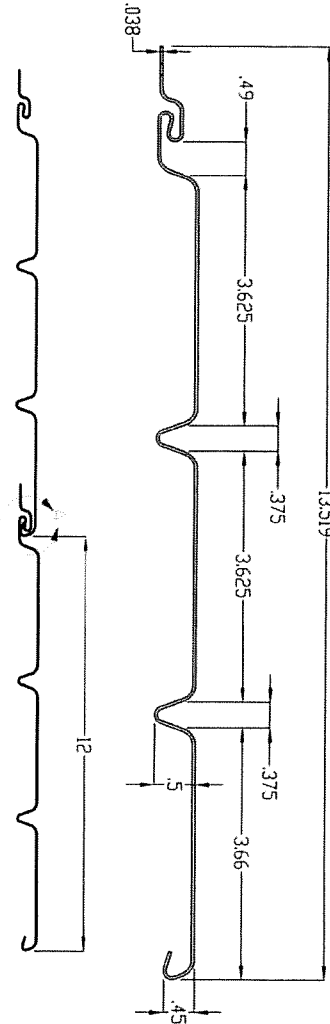
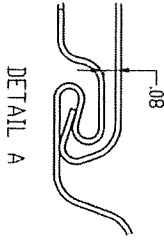
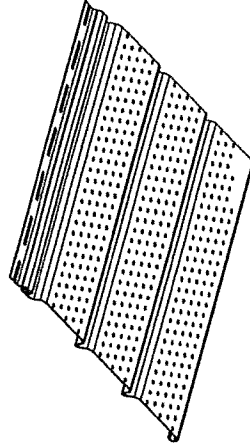
- Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
- Drawings should indicate materials to be used.

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.




12" TRIPLE 4 FULL-O-VENT SOFFIT ECO  
VINYL - NO. 639

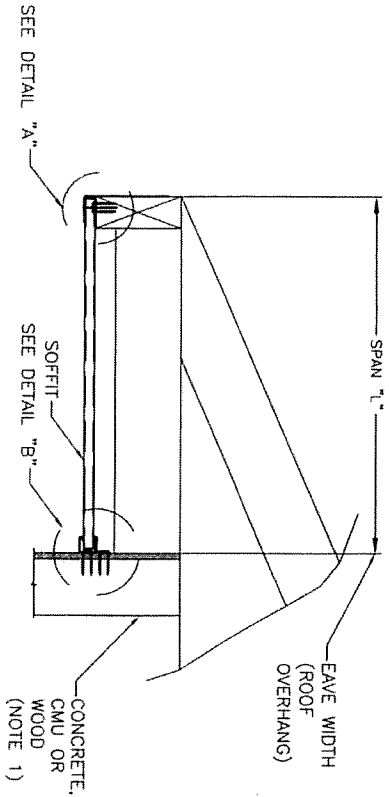


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Date: 2017.12.08 10:53:09 -05'00'

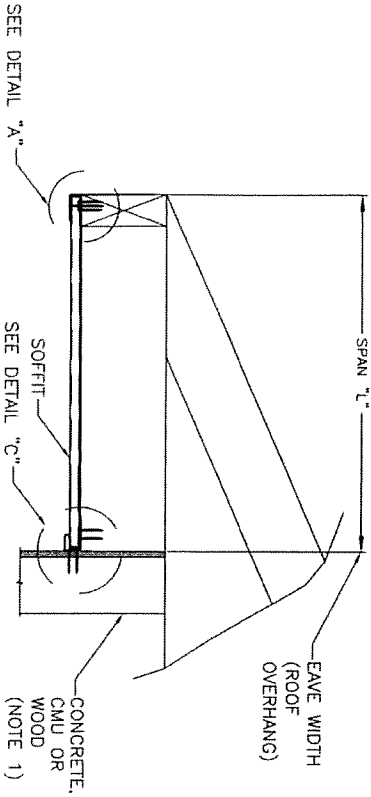
Robert J. Amoruso, P.E.  
Florida P.E. No. 49752

<b>KAYCAN LTD</b> 1 MEMORIAL DRIVE RICHFORD, VT 05476		PROJECT #417-0614	
TITLE: NO. 639 VINYL SOFFIT INSTALLATION - SINGLE SPANS SOFFIT PROFILE			
PREPARED BY: 	DRAWN BY: RJA	DATE: 03/20/17	
SCALE: N.T.S.	DRAWING NO: KAY0013		
REV: A	SHEET: 6 OF 7		
REV: A	DESCRIPTION: UPDATE TO CURRENT EDITION OF THE FBC	DATE: 11/27/17	BY: RJA

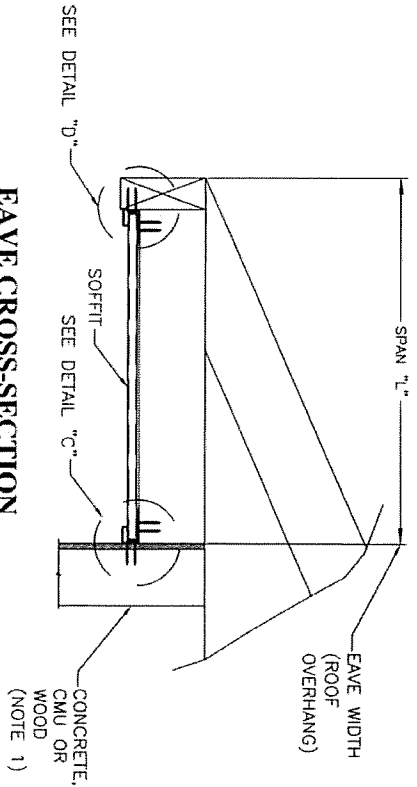
**TRUSS/FRAMING CANTILEVER EAVE CONSTRUCTION**



**EAVE CROSS-SECTION  
SINGLE SPAN W/R-CHANNEL**  
F-CHANNEL @ WALL, FASCIA @ FASCIA END



**EAVE CROSS-SECTION  
SINGLE SPAN W/J-CHANNEL**  
J-CHANNEL @ WALL, FASCIA @ FASCIA END



**EAVE CROSS-SECTION  
SINGLE SPAN W/J-CHANNELS**  
J-CHANNEL @ WALL AND FASCIA END

**SEE SHEET 2 FOR INSTALLATION NOTES, FASTENER SCHEDULE AND DESIGN PRESSURE PERFORMANCE RATING TABLES. SEE SHEET 5 OR DETAILS A, B, C & D.**

NOTE 1: MINIMUM SPRUCE-PINE-FIR FRAMING @ 24" O.C. OR CONCRETE/MASONRY. BUILDING CODE REQUIREMENTS FOR SUBSTRATE MATERIAL MUST BE MET.

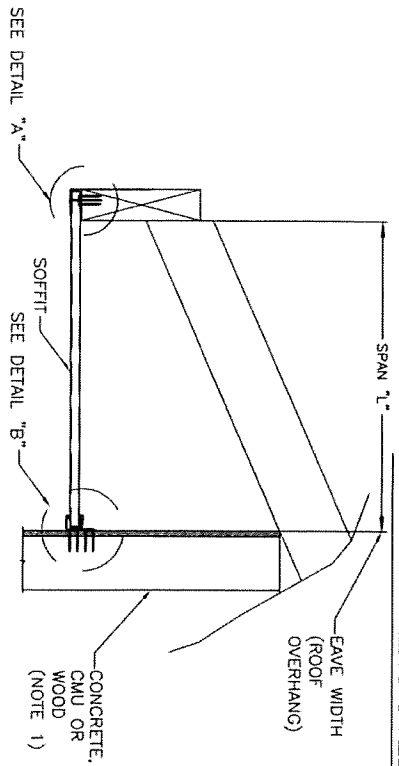
PROJECT #417-0614			
A	UPDATE TO CURRENT EDITION OF THE FBC	11/27/17	RJA
REV	DESCRIPTION	DATE	BY

<b>KAYCAN LTD</b> 1 MEMORIAL DRIVE RICHFORD, VT 05476			
TITLE: NO. 639 VINYL SOFFIT INSTALLATION - SINGLE SPANS INSTALLATION DETAILS - CANTILEVER CONSTRUCTION			
PREPARED BY:	DRAWN BY:	DATE:	
	RJA	03/20/17	
SCALE:	N.T.S.	DRAWING NO.:	KAY0013
REV:	A	SHEET:	3 OF 7

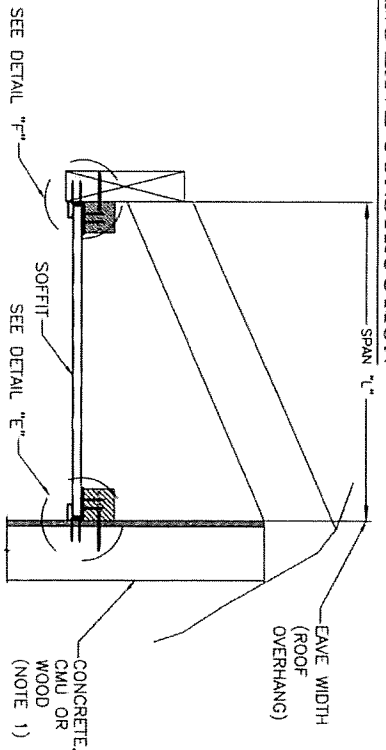
Robert J. Amoruso, P.E.  
Florida P.E. No. 49122

Digitally signed by Robert J Amoruso  
Date: 2017.12.08 10:52:39 -0500

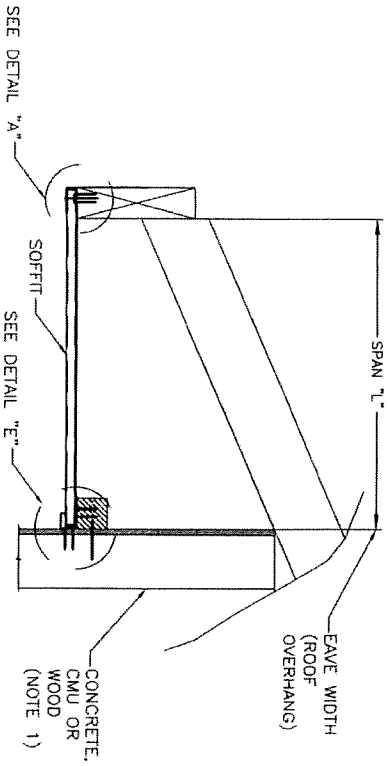
**TRUSS/FRAMING OVERHANG EAVE CONSTRUCTION**



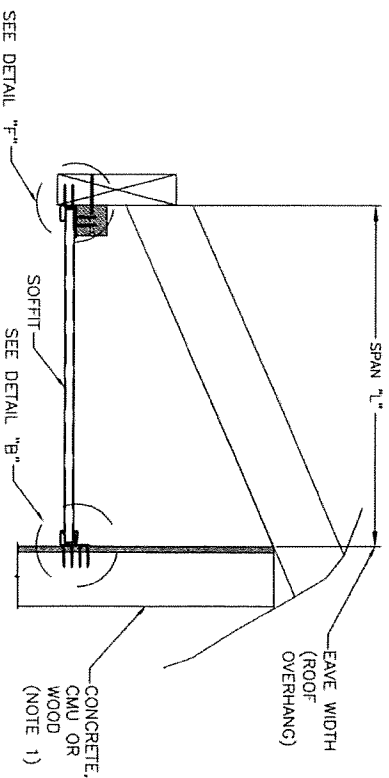
**EAVE CROSS-SECTION  
SINGLE SPAN W/F-CHANNEL**  
F-CHANNEL @ WALL, FASCIA @ FASCIA END



**EAVE CROSS-SECTION  
SINGLE SPAN W/J-CHANNELS**  
J-CHANNEL @ WALL AND FASCIA END



**EAVE CROSS-SECTION  
SINGLE SPAN W/J-CHANNEL**  
J-CHANNEL @ WALL, FASCIA @ FASCIA END



**EAVE CROSS-SECTION  
SINGLE SPAN W/F-CHANNEL**  
F-CHANNEL @ WALL, J-CHANNEL @ FASCIA END

**SEE SHEET 2 FOR INSTALLATION NOTES, FASTENER SCHEDULE AND DESIGN PRESSURE PERFORMANCE RATING TABLES. SEE SHEET 5 OR DETAILS A, B, E & F.**

NOTE 1: MINIMUM SPRUCE-PINE-FIR FRAMING @ 24" O.C. OR CONCRETE/MASONRY. BUILDING CODE REQUIREMENTS FOR SUBSTRATE MATERIAL MUST BE MET.

PROJECT #417-0614			
A	UPDATE TO CURRENT EDITION OF THE FBC	11/27/17	RJA
REV	DESCRIPTION	DATE	BY

<b>KAYCAN LTD</b> 1 MEMORIAL DRIVE RICHFORD, VT 05476			
NO. 639 VINYL SOFFIT INSTALLATION - SINGLE SPANS INSTALLATION DETAILS, OVERHANG CONSTRUCTION			
PREPARED BY:	DRAWN BY:	DATE:	
<b>PTC</b>	RJA	03/20/17	
SCALE:	N.T.S.	DRAWING NO:	KAY0013
REV:	A	SHEET:	4 OF 7

Robert J. Amoroso, P.E.  
Florida P.E. No. 49752

Digitally signed by Robert J. Amoroso  
Date: 2017.12.08 10:52:50 -0500'





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

COA#18-19    HISTORIC PRESERVATION BOARD APPROVAL    ADMINISTRATIVE APPROVAL

Site address: 903 Citrus Avenue

Contributing    Non-Contributing    Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Install aluminum storm shutters on all the window and door openings.  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                      2/23/18  
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	Kimberley Williams 903 Citrus Ave Fort Pierce, FL 34950	E-Mail
Applicant/Representative	Master Craft Aluminum / Jeff Jackman 1634 SE Niemeyer Cir. Port St Lucie, FL 34952	E-Mail <a href="mailto:mastercraftaluminum@gmail.com">mastercraftaluminum@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



# 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:** 903 Citrus Ave, Ft Pierce, Fl 34950

**Parcel ID #:** 2410-706-0077-000-2

**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): Kimberley Williams

Mailing Address: 903 Citrus Ave, Ft Pierce, Fl 34950

Phone Number(s): \_\_\_\_\_ 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, Kimberley Williams as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Kimberley Williams  
Signature of Owner

2/21/18  
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 type="checkbox"/> Signage          | <input checked="" 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) Installing Storm panels on all the window and door openings of the home.

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

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

Installing Storm panels on all the window and door openings of 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.

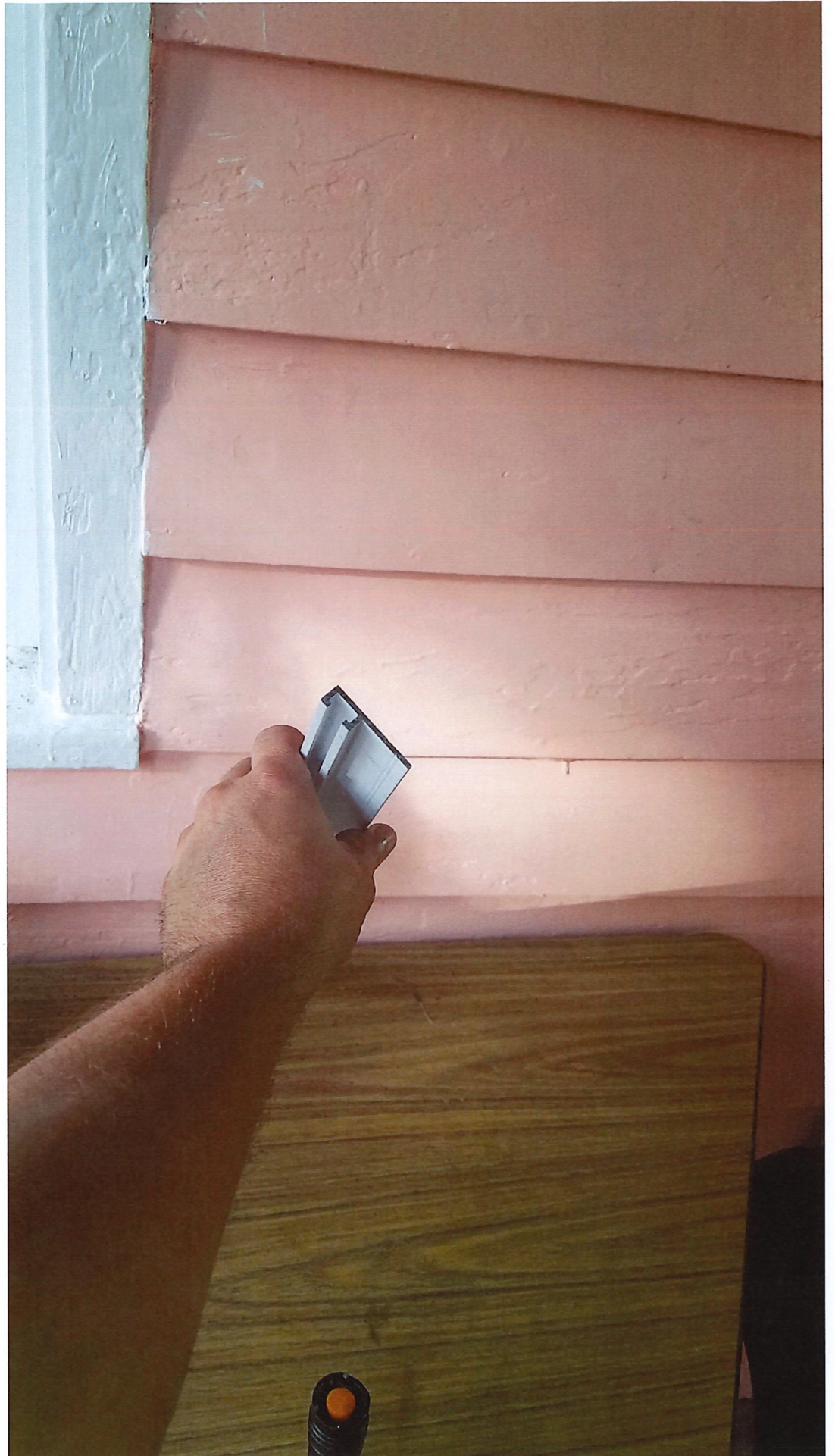










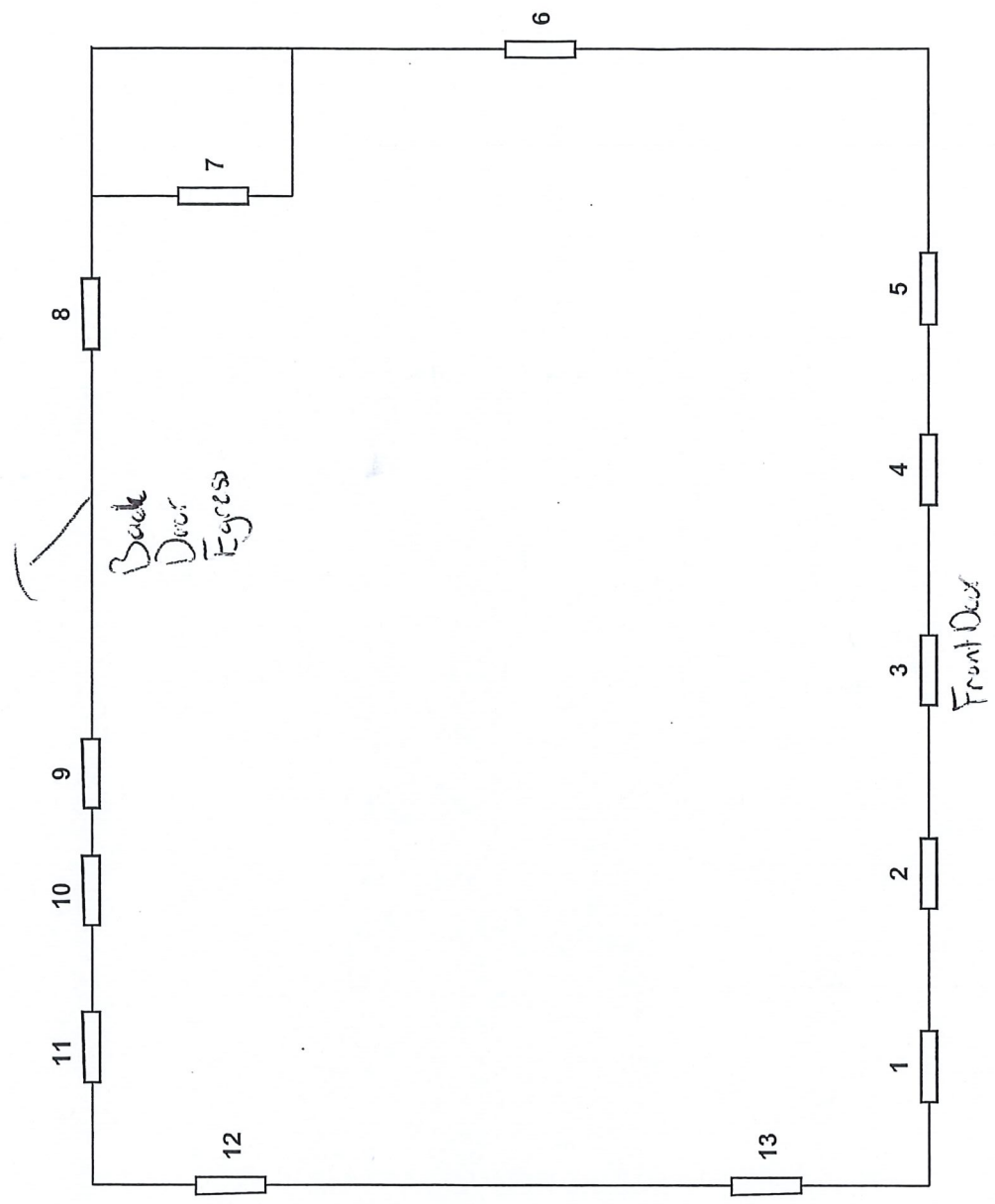


Opening	Size (W x H)
1. Storm Panels (Window)	39 x 59
2. Storm Panels (Window)	39 x 54
3. Storm Panels (Front Door)	41 x 82
4. Storm Panels (Window)	39 x 54
5. Storm Panels (Double Window)	81 x 40
6. Storm Panels (Side Window)	43 x 57
7. Storm Panels (Side Window)	39 x 59
8. Storm Panels (Back Window)	39 x 59
9. Storm Panels (Back Window)	29 x 41
10. Storm Panels (Back Window)	29 x 30
11. Storm Panels (Back Window)	39 x 59
12. Storm Panels (Side Window)	39 x 59
13. Storm Panels (Side Window)	39 x 59

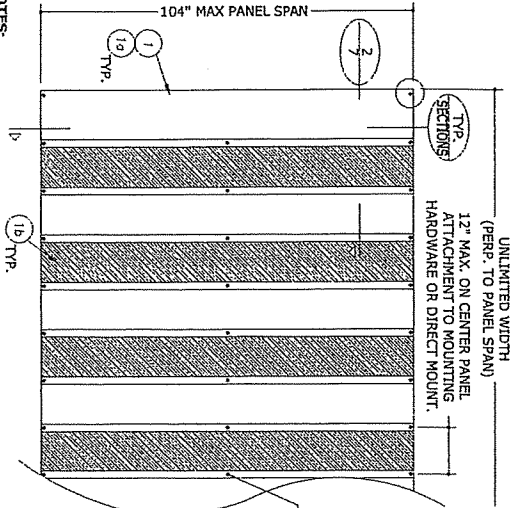
**CITY OF FORT PIERCE**

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

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

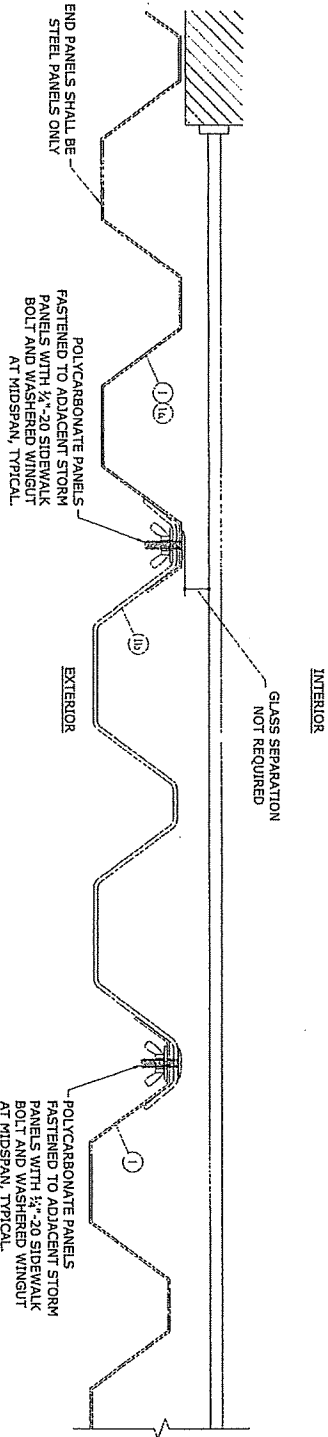






- NOTES:
1. TOP MAY BE SLOPED OR RADIUSED TO MATCH GEOMETRY OF OPENING. MOUNTING HARDWARE MUST BE ROLL-FORMED TO THE RADII. NO NOTCHING OF MOUNTING HARDWARE TO ACHIEVE SHAPES IS ALLOWED.
  2. STORM PANELS MAY BE MOUNTED VERTICALLY OR HORIZONTALLY.
  3. STEEL AND POLYCARBONATE PANELS SHALL ALTERNATE.
  4. END PANELS SHALL BE STEEL PANELS ONLY.

1  
7  
N.T.S.  
TYPICAL ELEVATION WITH ALTERNATING STEEL AND POLYCARBONATE PANELS

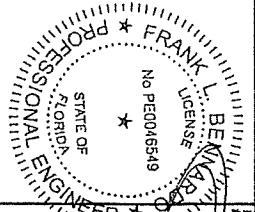


2  
7  
N.T.S.  
TYPICAL SECTION WITH ALTERNATING STEEL AND POLYCARBONATE PANELS

TABLE 2  
ALLOWABLE SPAN SCHEDULE (STEEL WITH POLYCARBONATE PANELS)

PANEL SPAN	ALLOWABLE DESIGN PRESSURE
106"	+ 33.3 PSF - 33.3 PSF
102"	+ 35.7 PSF - 35.7 PSF
98"	+ 39.3 PSF - 39.3 PSF
94"	+ 44.7 PSF - 44.7 PSF
90"	+ 50.8 PSF - 50.8 PSF
86"	+ 57.9 PSF - 57.9 PSF
82"	+ 67.0 PSF - 67.0 PSF

- TABLE 2 NOTES:
- LINEAR INTERPOLATION BETWEEN SHUTTER SPANS IS NOT PERMITTED. FOR SPANS BETWEEN THOSE INDICATED ABOVE, THE DESIGN PRESSURES FOR THE NEXT HIGHER SPAN SHALL BE USED.
  - DESIGN PRESSURES NOTED IN TABLE 2 APPLY TO ALL MOUNTING AND ANCHORAGE CONDITIONS AND SHALL NOT BE EXCEEDED.



**Town & Country INDUSTRIES**  
Wholesale Aluminum and Building Products  
400 WEST MCNAB ROAD  
FT. LAUDERDALE, FL 33309 FL12856.3

**ENGINEERING EXPRESS**  
CORPORATE OFFICE:  
160 SW 12th AVE, SUITE 106  
DEERFIELD BEACH, FL 33442  
P: (954) 354-0660 F: (954) 354-0443  
E: HELLO@ENGINEERINGEXPRESS.COM  
ENGINEERINGEXPRESS.COM  
CERT OF AUTH #9885

DRWN	CSL	CHKD	FLB	DATE
				04/01/16
DATE	DATE	DATE	DATE	DATE
04/01/16	04/01/16	04/01/16	04/01/16	04/01/16

REMARKS:  
2017 FBC

SCALE:  
14-2031

PAGE DESCRIPTION:  
14-2031

CERTIFIED TRUSS DESIGNER: 7



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

COA#18-20     HISTORIC PRESERVATION BOARD APPROVAL             ADMINISTRATIVE APPROVAL

Site address: 411 Cedar Place  
 Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Removal of the old shed and construction of a new CBS storage shed (custom designed for the site).  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

*Board Approval*

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

*Administrative Approval*

  
 \_\_\_\_\_                      3/01/18  
 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	Cephus W Cruickshank 2312 N 44 <sup>th</sup> Street Fort Pierce, FL 34945	E-Mail
Representative	Leroy Bennett Jr 2101 Valencia Avenue Fort Pierce, FL 34946	E-Mail <a href="mailto:Leroybjr77@att.net">Leroybjr77@att.net</a>
Other	Paul Thomas, CFP Building Administrator	E-Mail
	Kim West, CFP Building Department	E-Mail
	Susan Keller, CFP Building Department	E-Mail



Bldg. Permit # 17-2284

COA# 18-20

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 411 Cedar Place  
 Parcel ID #: 2403.705.0135.000-2  
 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): Cephus W Cruickshank  
 Mailing Address: 2312 N 44th St Ft Pierce 34946  
 Phone Number(s): (772) 940-8796 Email: N/A

Applicant  
 Name(s): Cephus W Cruickshank  
 Mailing Address: 2312 N 44th St Ft Pierce 34946  
 Phone Number(s): (772) 940-8796 Email: N/A / 772/359-7413

Representative  
 Name(s): Leroy Bennett Jr.  
 Mailing Address: 2101 Valencia Ave  
 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, Cephus Cruickshank as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.  
Cephus Cruickshank Signature of Owner 02/27/2018 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)

Demo Old Shed - Replace w/New

Other (describe)

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

Old Shed  
damaged Demo'd - replace with  
CBS Storage Shed w Elec & Plmng.

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.

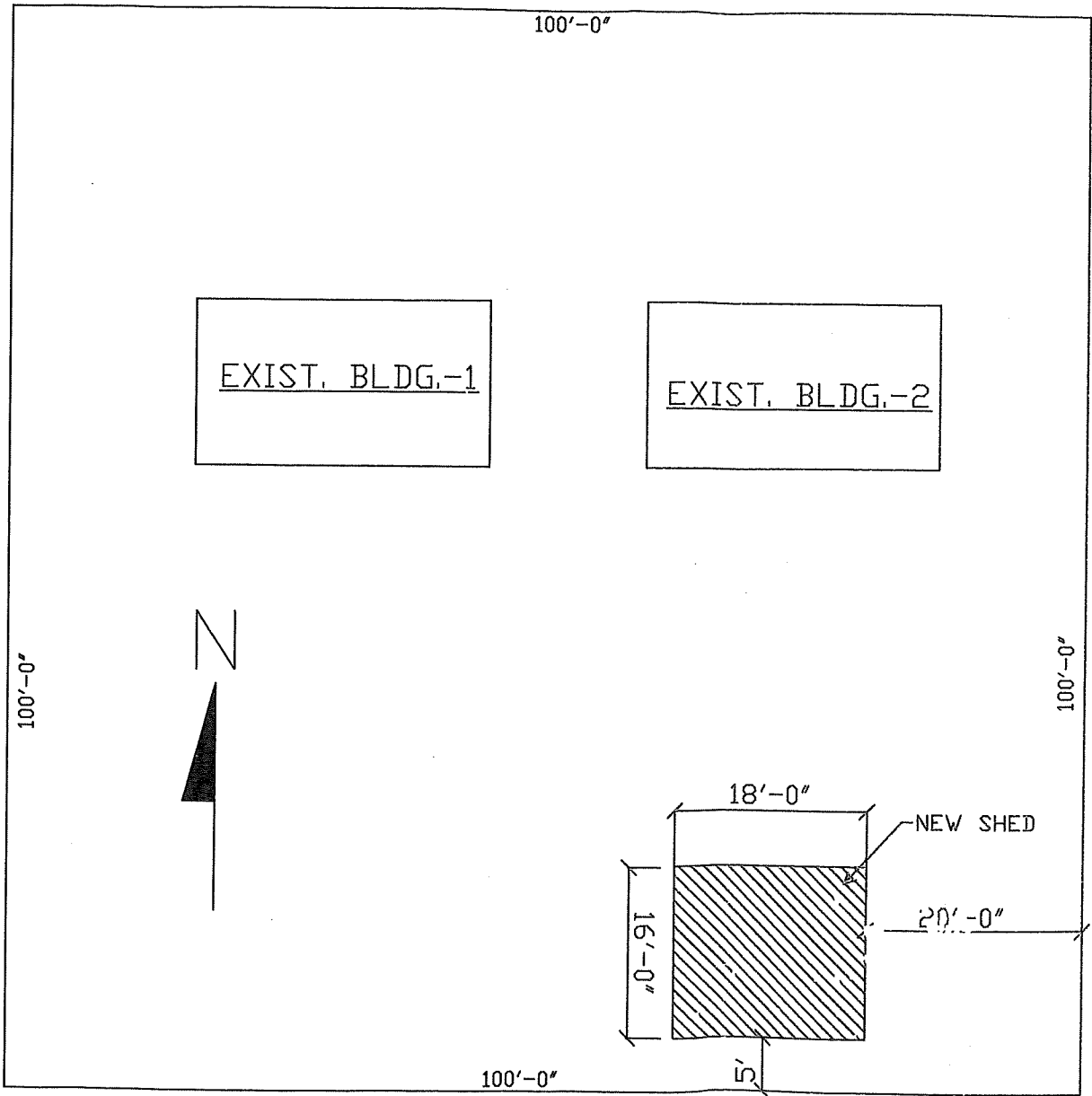
Material(s) specifications and/or sample(s)

Color samples.

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

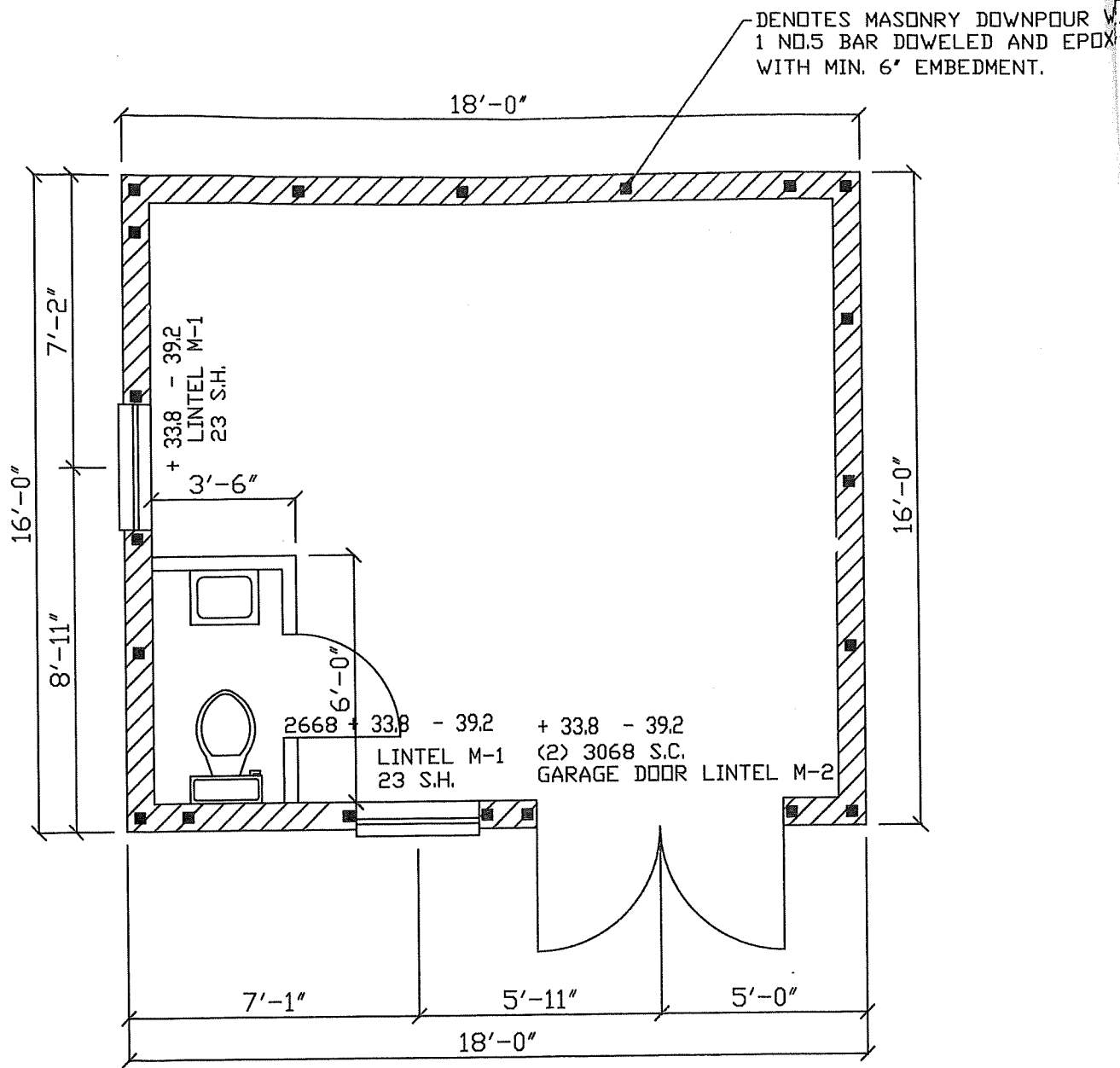
CEDAR PLACE

N. 6TH STREET



PLOT PLAN

1/16"=1'-0"

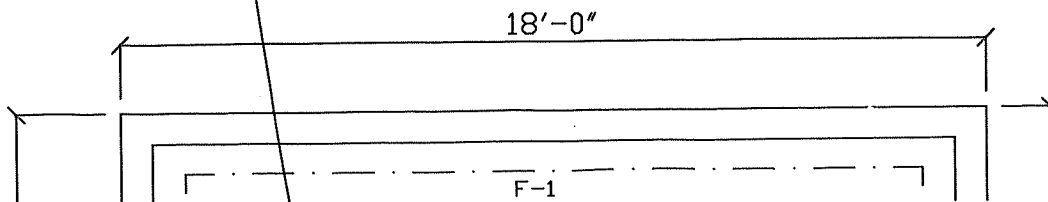


# FLOOR PLAN

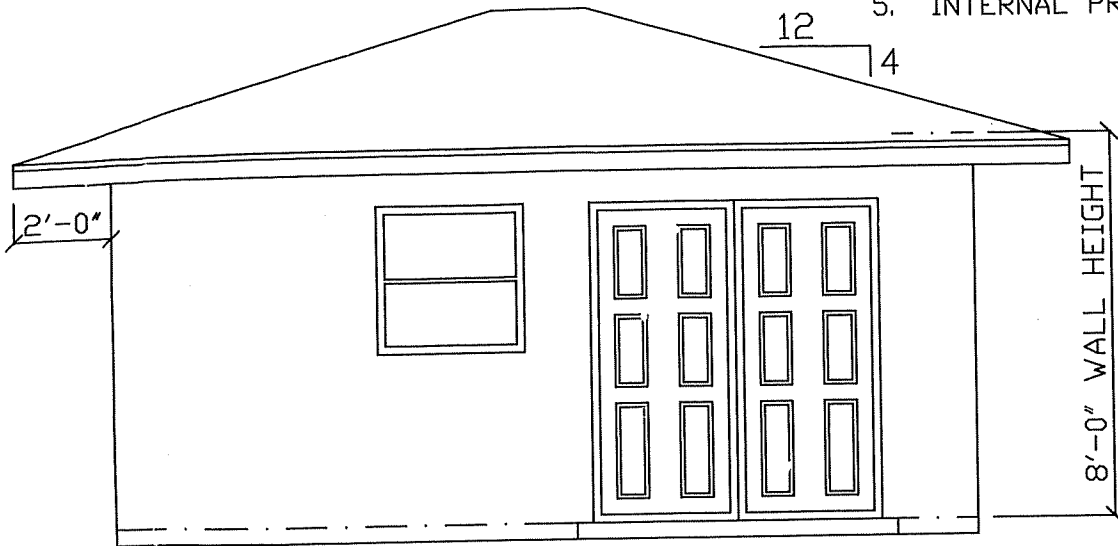
1/4" = 1'-0"

Slabs to be 4" thick 3000 psi fibermesh concrete over 6 MIL. vapor barrier over clean compacted termite treated soil.  
(6x6x10x10 wwf may be used in lieu of fibermesh)

Take all dimensions from floor plan. DO NOT SCALE.

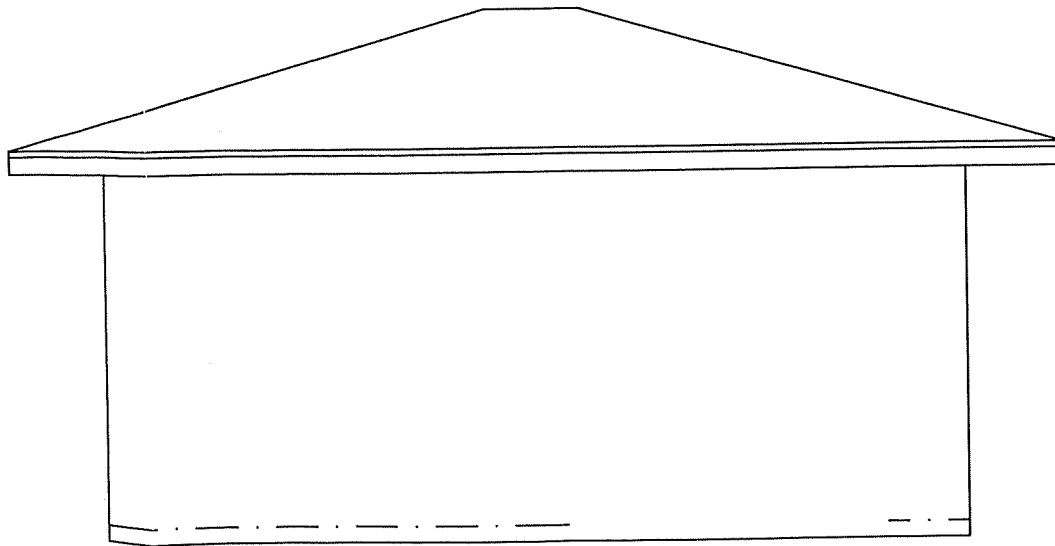


1. BASIC WIND SPEED - 160 MPH
2. WIND IMPORTANCE FACTOR -
3. BUILDING CATEGORY - II
4. WIND EXPOSURE - C
5. INTERNAL PRESSURE COEFFICIENT



FRONT ELEVATION

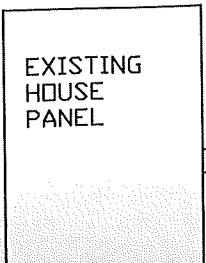
1/4"=1'-0"



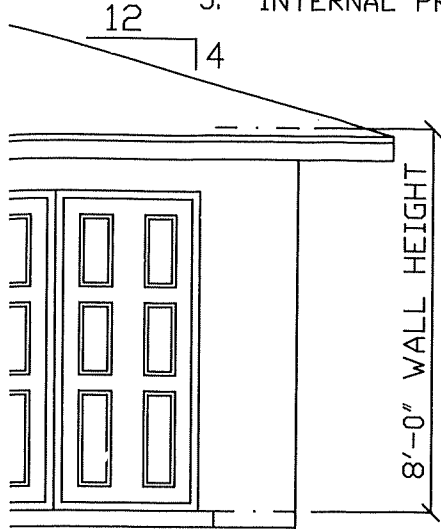
REAR ELEVATION

1/4"=1'-0"

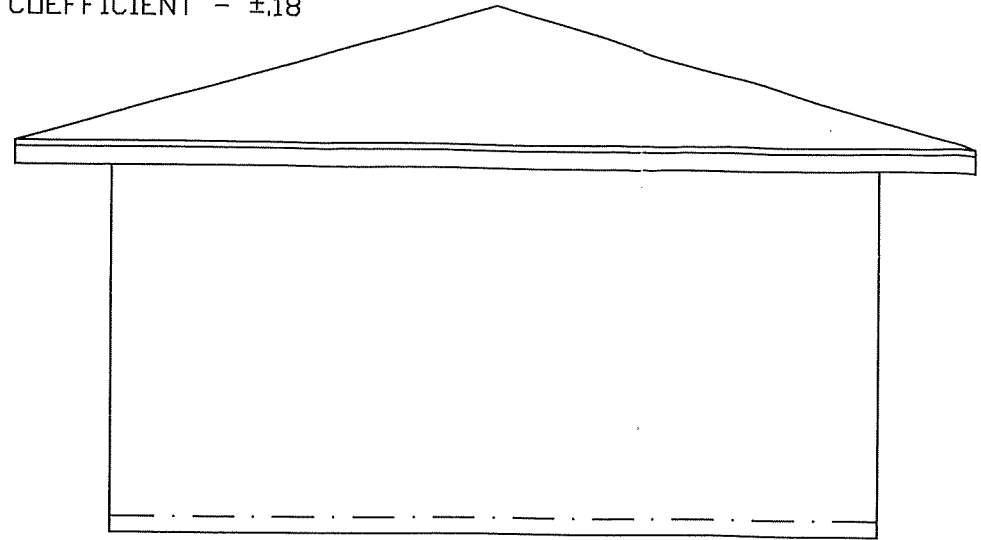
ELECTRICAL SYMBOLS LEGEND	
	4'-0" FLOURESENT
	SINGLE POLE SWITCH
	220 OUTLET
	PANEL BOX



2. WIND IMPORTANCE FACTOR - 1
3. BUILDING CATEGORY - II
4. WIND EXPOSURE - C
5. INTERNAL PRESSURE COEFFICIENT - ±.18

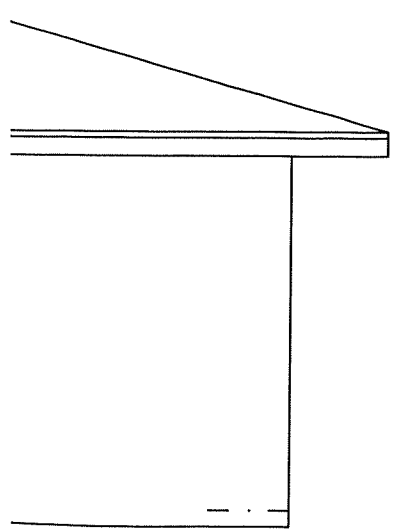


FRONT ELEVATION

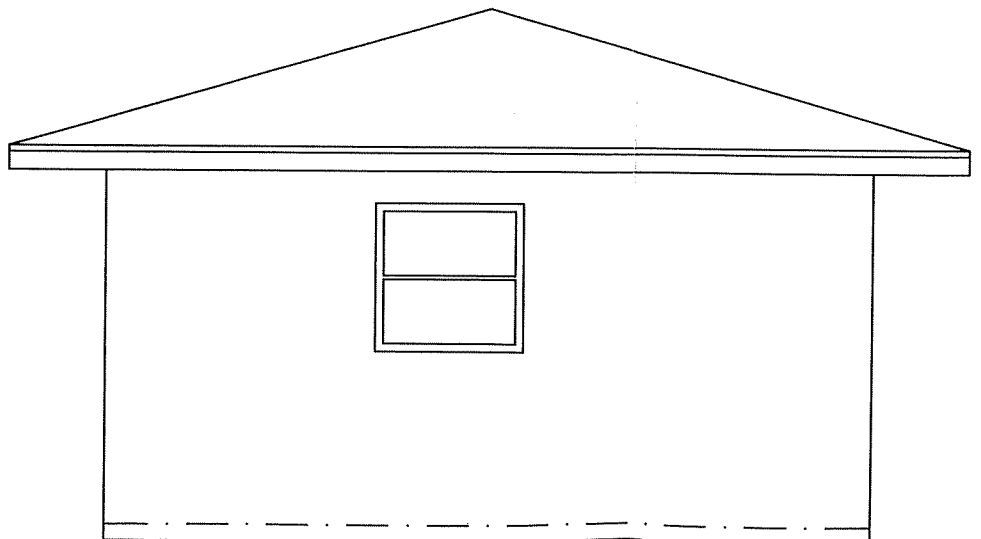


RIGHTSIDE ELEVATION

1/4" = 1'-0"



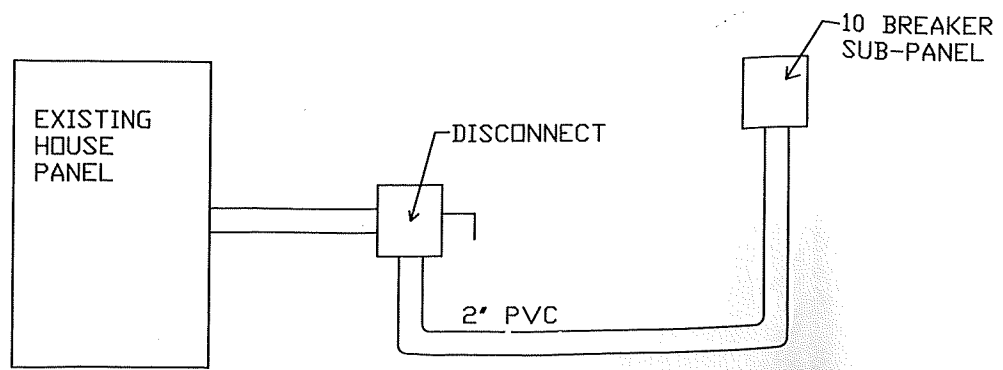
LEFTSIDE ELEVATION



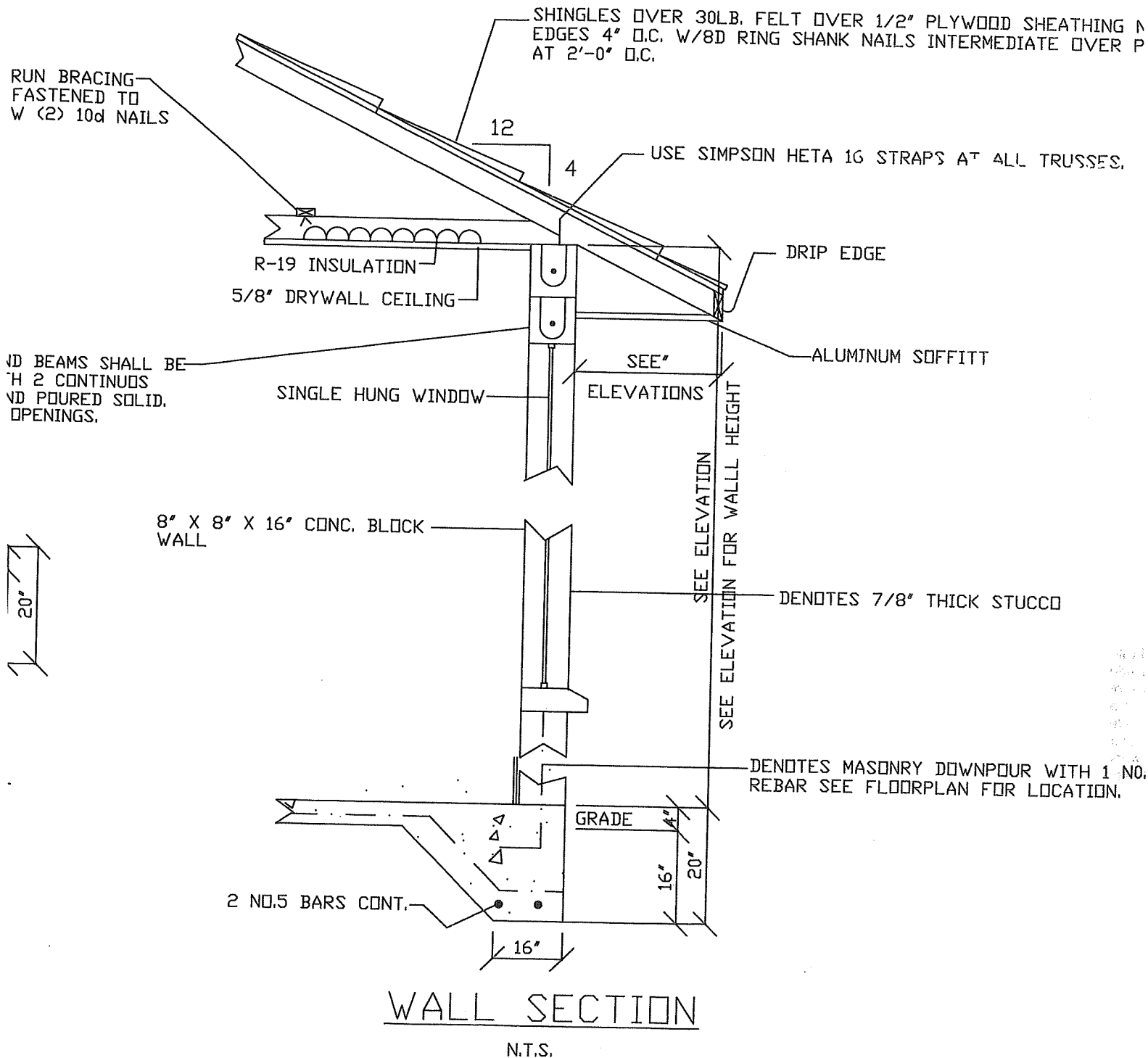
RIGHTSIDE ELEVATION

1/4" = 1'-0"

S	LEGEND
SENT	
SWITCH	
ET	
LET	



LOAD CALCULATION FOR SHED



TO CITY SEWER

PLUMBING  
N.T.S.

Pictures Shed  
old shed





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

COA#18-21     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 725 Avenue D

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Install new, non-illuminated façade sign – “Beth Ryder Intermodal Facility”  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

  
 \_\_\_\_\_                      3/01/18  
 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	St Lucie County 2300 Virginia Avenue Fort Pierce, FL 34982	E-Mail
Applicant	Glomaster Signs 4141 Bandy Blvd. Fort Pierce, FL 34981	E-Mail <a href="mailto:signs30@bellsouth.net">signs30@bellsouth.net</a>
Other	Paul Thomas, CFP Building Administrator Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



RECEIVED

FEB 28 2018

COA# 18-21

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

CITY OF FORT PIERCE  
PLANNING DEPARTMENT

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 725 Ave D  
Parcel ID #: 241060101970007  
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 County  
Mailing Address: 2300 Virginia Ave. Ft. Pierce, FL 34982  
Phone Number(s): 462-5163 Email: \_\_\_\_\_

Applicant  
Name(s): Glomaster Signs  
Mailing Address: 4141 Bandy Blvd. Ft. Pierce, FL 34981  
Phone Number(s): 772-464-0718 Email: Signs30@bellsouth.net

Representative  
Name(s): James Hart  
Mailing Address: 4141 Bandy Blvd.  
Phone Number(s): 772-464-0718 Email: SIGNS30@BELLSOUTH.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, Howard Tipton as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

2/20/18  
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: installation of  
new 12" non-illuminated plastic letters copy to  
read Beth Ryder Intermodal Facility

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 should be submitted.



# 12" NON-ILLUMINATED INJECTION MOLDED PLASTIC LETTERS FONT HELVETICA COLOR DURANODIC BRONZE

**Anchor Notes:**

- Letters shall be min 1/4" thick x 1/4" min stroke width
- #10-24 studs (6061-T6 Alum or 316 S.S.), centered in stroke width
- Min (3) studs per letter, spaced evenly
- Letters drilled and tapped to receive studs, min (5) threads engaged
- Stud length to accommodate embed to host structure
- Min 1.5" stud embed to hollow CBS (block) or concrete
- Fill holes w/ LiquidNails LN-901 adhesive (or equiv)



41.05 A



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

- Wall components & cladding
- Zone 5: ± 46.0 psf
- Zone 4: ± 36.1 psf
- ASD Load Coeff = 0.6
- Sign Height = 30 ft max
- Kz1=1.0, Kd=0.85, G=0.85
- Risk Category 2 Structure
- V=160 mph • Exposure 'C'
- ASCE 7-10 WIND LOADS:

**GLOMASTER SIGNS**  
772-464-0718  
772-464-2157 FAX  
signs30@bellsouth.net

**General Notes:** Design is in accordance with the requirements of the Fla Bldg Code 6th Ed (2017) 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. Structural design meets requirements of ACI 318, 4, ASC 360-1, ADW-1, 5, & NDS-1, as applicable. Steel components shall be coated, painted, or otherwise protected against corrosion per ACI 308.3, 308.3.2, 222.6. Aluminum components shall be anodized or otherwise protected against corrosion per ACI 308.3, 308.3.2, 222.6. Aluminum components shall be anodized or otherwise protected against corrosion per ACI 308.3, 308.3.2, 222.6. All dimensions shall be per actual construction unless noted. All materials shall be as specified in the contract documents unless otherwise noted. All materials shall be as specified in the contract documents unless otherwise noted. All materials shall be as specified in the contract documents unless otherwise noted.

