

### **Administrative Certificates of Appropriateness**

Attached are Certificates of Appropriateness issued administratively in March 2018.

- COA #18-22, 415 N 13<sup>th</sup> Street – Solar Panel
- COA #18-23, 426 Means Court – Roof Replacement
- COA #18-26, 405 S 7<sup>th</sup> Street – Façade Sign
- COA #18-27, 411 N 2<sup>nd</sup> Street – Façade Sign



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

COA#18-27     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
Install new façade sign with LED lighting. Sign color will resemble weathered copper.  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

\_\_\_\_\_                      4/04/18  
 Maria Lewicka, MCP                      Date  
 Historic Preservation Planner

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

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



# 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: 411 N 2nd Street

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

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

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

#### Property Owner/ Applicant Information

Property Owner(s) Name(s): Jon Nalli

Mailing Address: 411 N 2nd St

Phone Number(s): 561-758-6497 Email: jonnalli@aol.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, Jon Nalli as Owner(s) of the subject property, do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

3/12/18  
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 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) Adding sign to front of building.

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

Installation of business sign on east wall of building as illustrated in the attached documentation. Sign will be affixed/secured to the building. Sign has internal LED lighting. LED lighting can display a wide range of colors/hues. Reds will not be used with lighting. Sign color will resemble weathered copper.

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.



Proposed Sign  
42" Diameter  
Centered on Wall

53"

43"

77-1/4"

20' 6"

52"

70"







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

COA#18-26     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 405 S 7<sup>th</sup> Street

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Install new non-illuminated façade sign.  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                      3/28/18  
 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	Genesis PT LLC 441 NW Prima Vista Blvd. # 105 Port St. Lucie, FL 34983	E-Mail
Applicant	Flamingo Signs LLC 4444 SE Commerce Avenue Stuart, FL	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



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

MAR 27 2018  
CITY OF FORT PIERCE

Bldg Permit # 18-676

COA# 18-26

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 405 S 7th St  
Parcel ID #: 2410-708-0001-000-5  
Type of Designation:  Contributing  Non-contributing Site within the \_\_\_\_\_ Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s) Name(s): Genesis PT LLC  
Mailing Address: 441 NW Poma Vista Blvd #105 PSL, FL  
Phone Number(s): 772-460-2520 Email: thomasjorge@aol.com

Applicant Name(s): Flamingo Signs LLC  
Mailing Address: 4444 SE Commerce Ave Stuart, FL  
Phone Number(s): 772-220-7377 Email: flamingosigns@aol.com

Representative Name(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

*Property Owner(s) Acknowledgments: 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, TOM FISHER as Owner(s) of the subject property, do hereby authorize the filing of this application on my/our behalf.  
Tom Fisher Signature of Owner  
3/9/18 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) \_\_\_\_\_

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

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

*Install new non-illuminated sign*

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.

1 - ALUMINUM COMPOSITE PANEL WITH HP VINYL GRAPHICS FIRST SURFACE

**"REVIEWED FOR CODE COMPLIANCE"**

A permit issued shall be construed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code inadvertently overlooked during plan review as outlined in Chapter 1 Section 105.4 of the Florida Building Code. All proposed work is subject to any corrections required by field inspectors that may be necessary in order to comply with applicable codes.

24 SF  
MAX

ALLOWABLE SIGN AREA = 20 S.F.  
 BUILDING = 12' X 60' = 720 S.F.  
~~720 X 12% = 86.4 S.F.~~  
 ALLOWABLE SIGN AREA = 86.4 S.F.  
 SIGN = 4' X 5' = 20 S.F.

CITY OF FORT PIERCE

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



These plans and all proposed work are subject to any corrections required by field inspectors that may be necessary in order to comply with all applicable codes



12'

60' BUILDING FRONT

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

QUALITY PERFORMANCE ADDRESS FT PIERCE  
 WORK & COLORS MUST BE SIGNED OFF BEFORE ANY WORK IS TO BEGIN  
 ANY CHANGES ONCE WORK BEGINS.



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

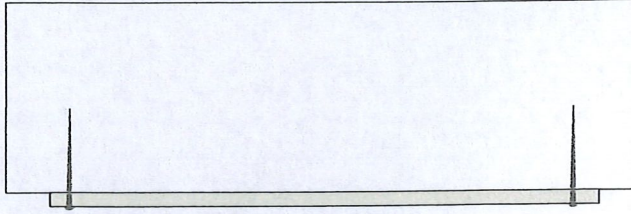
This drawing, rendering & specs are the exclusive property of Flamingo Signs. No part of this drawing or specification may be reproduced in any way, shape or form without the expressed written consent of the client.

# ALUMINUM COMPOSITE WALL SIGN

1/4" ALUMINUM WITH POLYETHELENE  
CORE SIGN PANEL WITH VINYL GRAPHICS  
ON PRIMARY SURFACE

PANEL MOUNTED TO WALL WITH  
8 - 1/4" x 2.25" TAPCONS

WALL SECTION: CONCRETE BLOCK



8-16-18  
2

ULTIMATE WIND VELOCITY = 170 MPH  
RISK CATEGORY II EXPOSURE "C"  
6th EDITION "2017 FBC"

TITLE QUALITY PERFORMANCE ADDRESS FT PIERCE  
NETWORK & COLORS MUST BE SIGNED OFF BEFORE ANY WORK IS TO BEGIN  
COLORS ARE REQUIRED OR MORE DETAILS PLEASE NOTE. CUSTOMER IS  
FOR ANY CHANGES ONCE WORK BEGINS.



4444 S.E. COMMERCE AVE.  
STUART, FL 34997  
772 220 7577  
FAX 772 220 7768

JAMES E. PAIT, P.E. REG # 25497  
12201 S.E. COLBY AVE. HOBE SOUND, FL 33455  
PHONE 545 9553 FAX 545 9279



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

COA#18-22     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 415 N 13<sup>th</sup> Street

Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Install one 4 x 8 solar panel on the roof for domestic hot water system.  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

  
 \_\_\_\_\_                      3/09/18  
 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.	Mamie Ingram PO Box 2803 Fort Pierce, FL 34954	E-Mail
Representative	Climatic Solar Corporation 650 2 <sup>nd</sup> Lane Vero Beach, FL 32962	E-Mail <a href="mailto:office@climaticsolar.com">office@climaticsolar.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 # BLD2018020091

COA# 18-22



# 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: 415 N 13th Street

Parcel ID #: 2409-502-0031-000-8

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): Ingram, Mamie

Mailing Address: PO Box 2803 Ft. Pierce, FL 34954

Phone Number(s): 772-532-6504 Email: \_\_\_\_\_

Applicant  
Name(s): Ingram, Mamie

Mailing Address: PO Box 2803 Ft. Pierce, FL 34964

Phone Number(s): 772-532-6504 Email: \_\_\_\_\_

Representative  
Name(s): Climatic Solar Corp

Mailing Address: 650 2nd Lane Vero Beach, FL 32962

Phone Number(s): 772-567-3104 Email: office@climaticsolar.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, Mamie Ingram as Owner(s) of the subject property, do hereby authorize the filing of this application on my/our behalf.

Mamie Ingram  
Signature of Owner

2/27/2018  
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 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) Solar Domestic Hot Water System

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

Install (1) 4X8 solar panel on roof for domestic hot water system.

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**

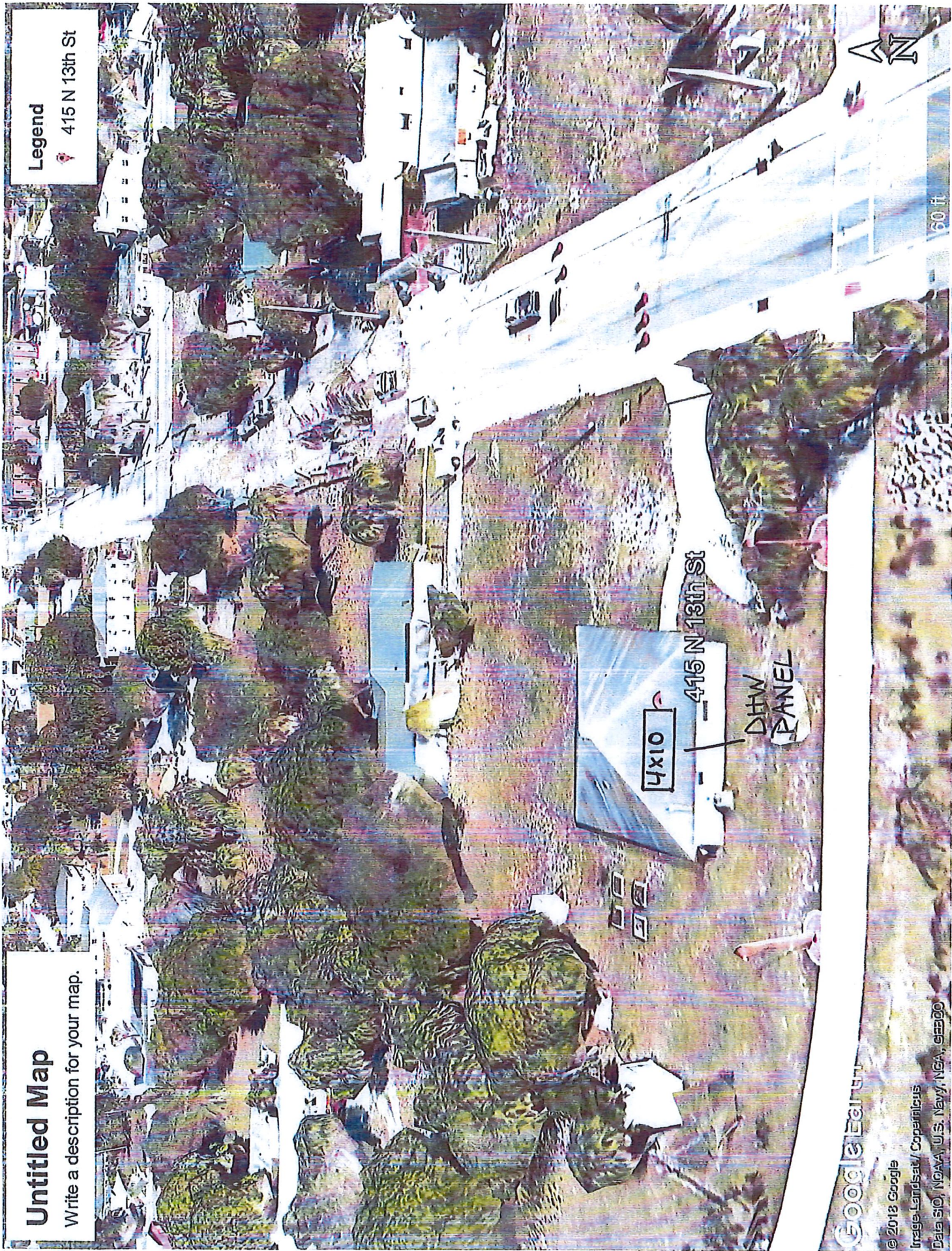
- \$10.00 Application fee
  - Site Plan with dimensions.
  - Architectural Drawings:
    - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
    - Drawings should indicate materials to be used.
  - Photos - One (1) color photograph 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.

# Untitled Map

Write a description for your map.

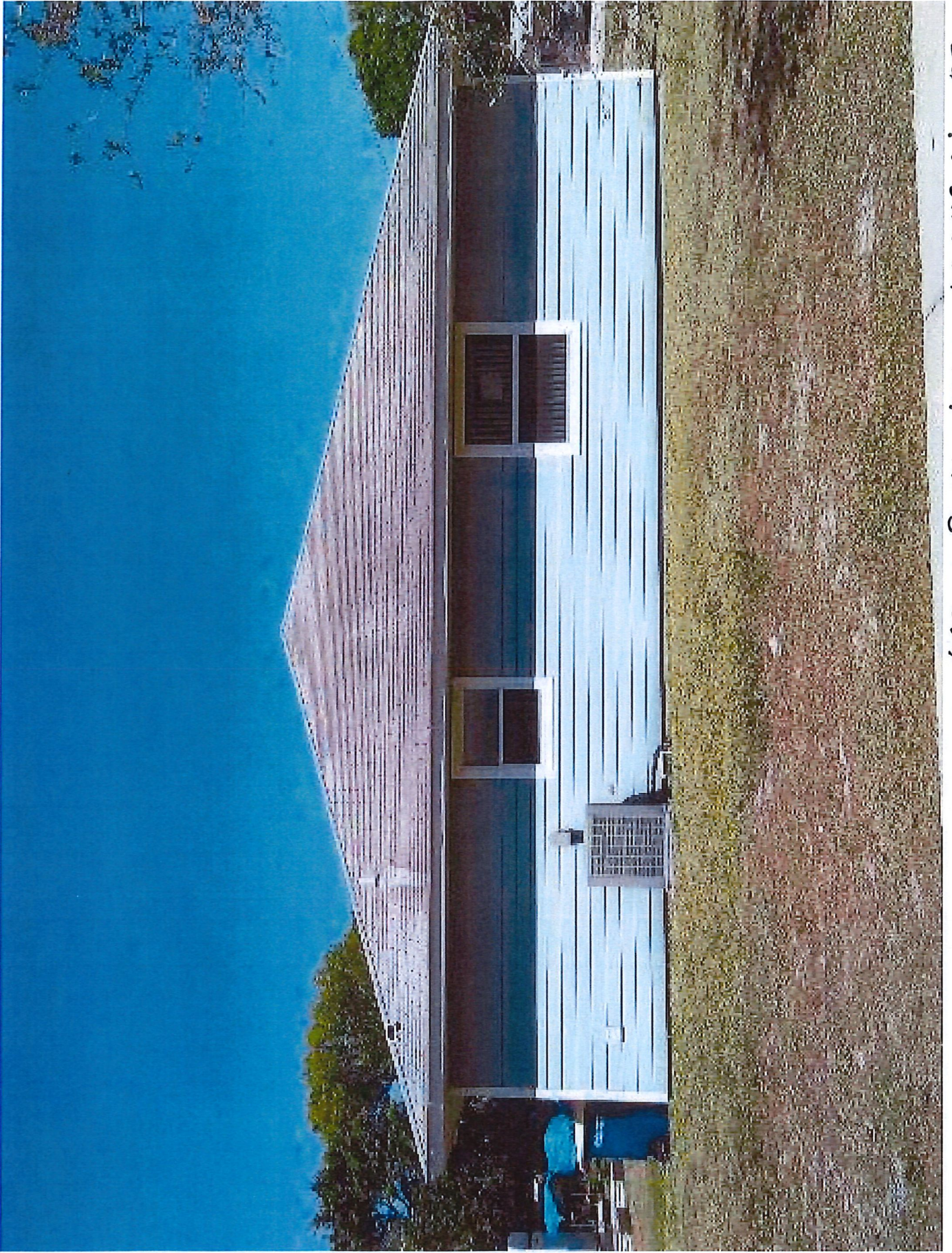
## Legend

📍 415 N 13th St



Google Earth

© 2013 Google  
Image Landsat / Copernicus  
Data SIO, NOAA, U.S. Navy, NGA, GEBCO



ROOF FACING SOUTH WHERE PANELS WILL BE.



ROOF RACING WEST



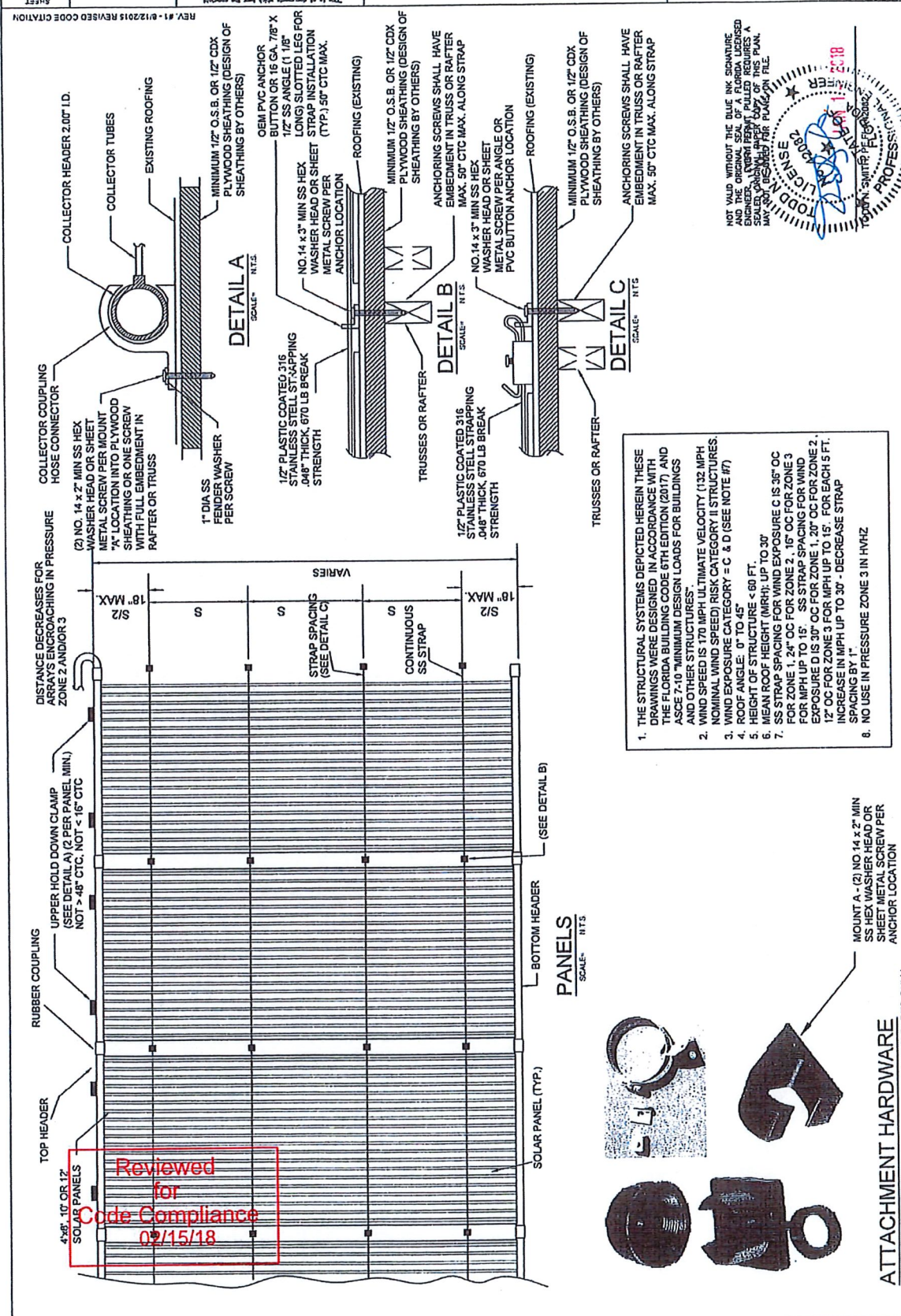
*ROOF FACING EAST*



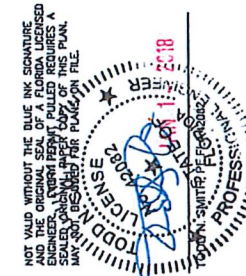
DESIGNED	TJS
CHECKED	TJS
DATE	11-11-2018
SCALE	N.T.S.

TODD N. SMITH, P.E., INC.  
SEASATAN, FL 32058  
Ph. (772) 589-8722

INSTALLATION OF A ROOF TOP  
SOLAR POOL HEATER



1. THE STRUCTURAL SYSTEMS DEPICTED HEREIN THESE DRAWINGS WERE DESIGNED IN ACCORDANCE WITH THE FLORIDA MINIMUM DESIGN CODE (2017) AND ASCE OTHER STRUCTURES.
2. WIND SPEED IS 170 MPH ULTIMATE VELOCITY (132 MPH NOMINAL WIND SPEED) RISK CATEGORY II STRUCTURES
3. HEIGHT OF STRUCTURE < 60 FT
4. ROOF ANGLE: 0° TO 45°
5. MEAN ROOF HEIGHT (MRY) UP TO 30'
6. SS STRAP SPACING FOR WIND EXPOSURE C IS 36" OC FOR ZONE 1, 24" OC FOR ZONE 2, 15" OC FOR ZONE 3 FOR MPH UP TO 15'
7. SS STRAP SPACING FOR WIND EXPOSURE D IS 30" OC FOR ZONE 1, 20" OC FOR ZONE 2, 12" OC FOR ZONE 3 FOR MPH UP TO 15'. FOR EACH 5 FT. INCREASE IN MPH UP TO 30' - DECREASE STRAP SPACING BY 1"
8. NO USE IN PRESSURE ZONE 3 IN HVHZ



NOT VALID WITHOUT THE BLUE INK SIGNATURE AND THE ORIGINAL SEAL OF A FLORIDA LICENSED ENGINEER. EVERY PERMIT PULLED REQUIRES A SEAL ORIGINAL TO THE COPY OF THIS PLAN. MAXIMUM PENALTY PER PAGE \$1000.





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



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

COA# 18-23

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 426 Means Ct Ft Pierce, FL 34951

Parcel ID #: 2409-501-0248-000-9

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

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

### Property Owner / Applicant Information

Property Owner(s) Name(s): Salvatore & Susana Marchese

Mailing Address: 2410 93<sup>rd</sup> St Flushing, NY 11369

Phone Number(s): 561-404-9051 Email: \_\_\_\_\_

Applicant Name(s): All Area Roofing / Andrew Griffin

Mailing Address: 3921 S US Hwy 1 Ft Pierce, FL 34982

Phone Number(s): 772-464-6800 Email: jennifer@allarearofing.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, Salvatore & Susana Marchese as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Salvatore Marchese  
 Signature of Owner

Susana Marchese

02/28/2018  
 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) Shingle/Flat Re-roof  
 Other (describe) \_\_\_\_\_

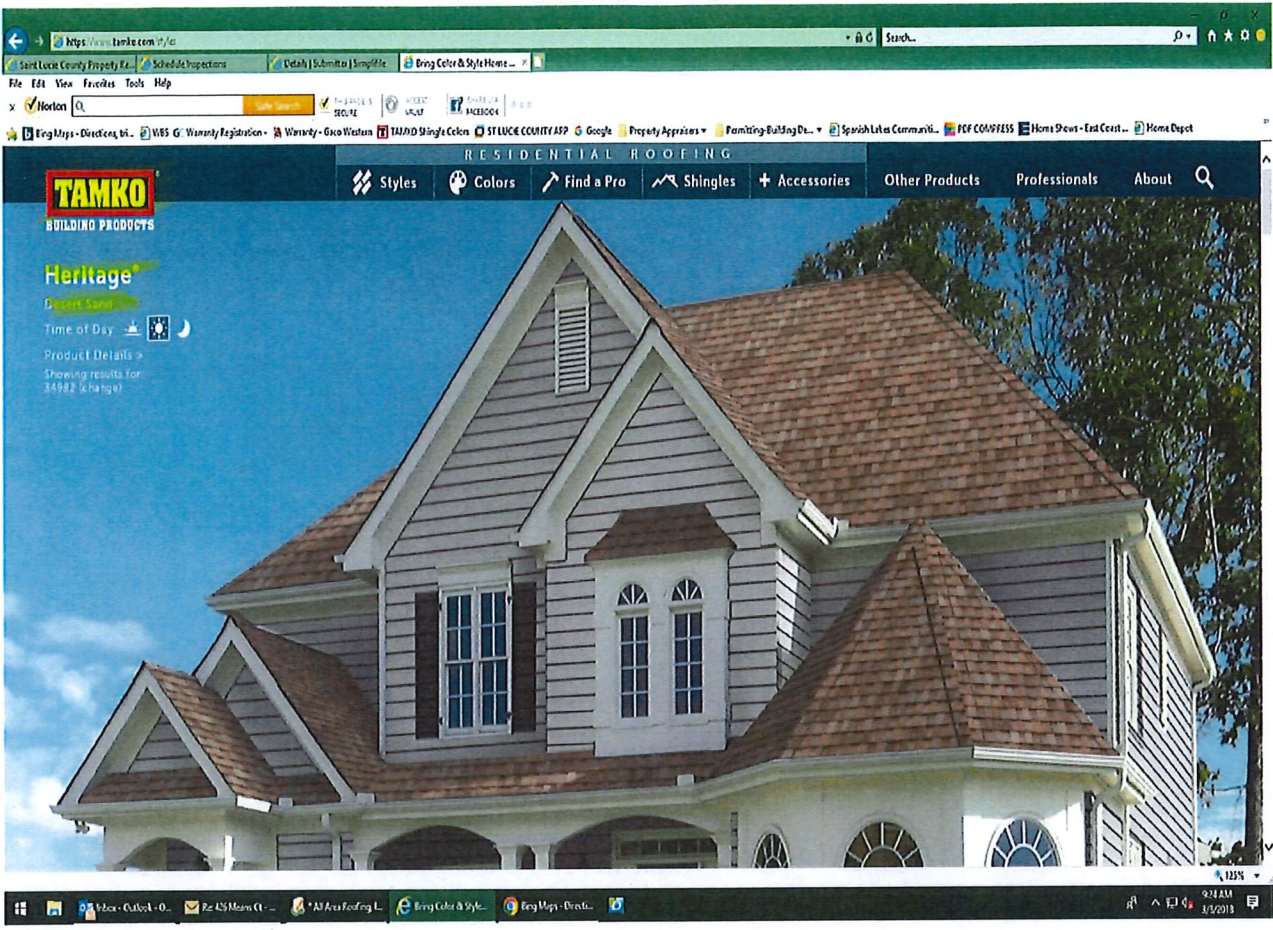
Please provide a detailed description of the proposed work to be performed: Tear off existing shingle/flat roof & install a new shingle/modified roof

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

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) Tamko Heritage FL # 18355.1
- Color samples. Desert Sand
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.



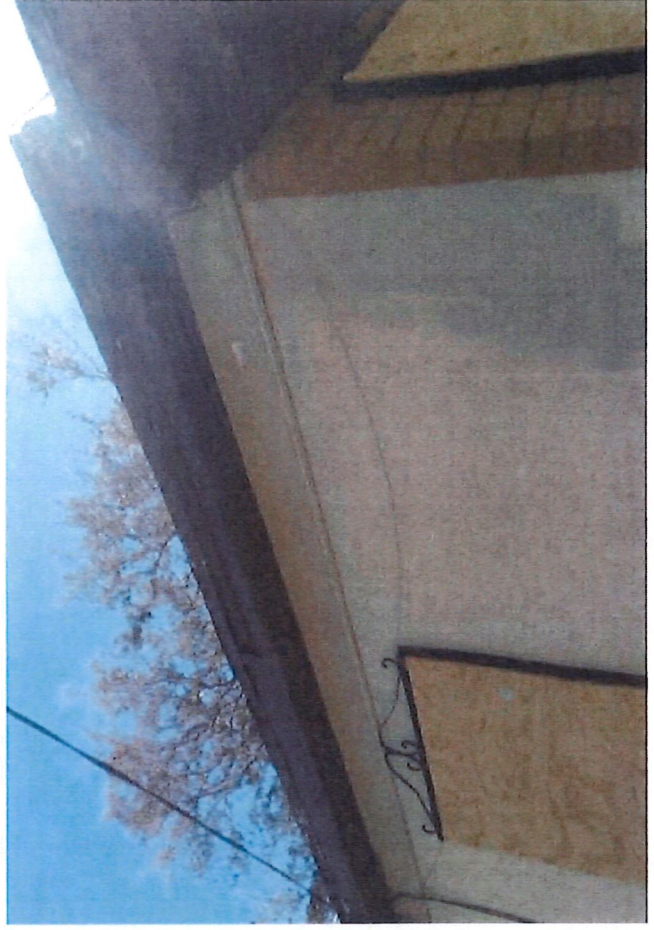
426 Means Ct



426 Means Ct



426 means CT



Yale Means Cf

