

THE SUNRISE CITY
FORT PIERCE
 CODE ENFORCEMENT

Florida

14-0745

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

Date:	2-6-19				
Property address:	1108 Ave G, Fort Pierce, FL 34950				
Owner(s) of record:	Carlson Family, LLC				
Mailing address:	2103 Sunrise Blvd, Fort Pierce, FL 34982				
Property tax ID #:	2404-821-0020-0003				
Original purchase date:	9-21-15	Original purchase price:	21,100.00		
Property is used for:	<input checked="" type="checkbox"/> Single Family	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Vacant Lot
Name of person requesting reduction:	Noah Jacobson		Relationship to owner(s)	Owner	
Telephone #:	305-360-6262		Mobile phone #:	←	
E-mail:	Lnjacobson@hotmail.com		Preferred contact method:	cell	
What are owner(s) intentions for property:	Hold, rent				
Are there current code violations?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Explain: (please attached notice)		
Is property listed for sale?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, what is listing price?		
Is property under contract for sale?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, what is the sale price?		

AMOUNT OF FINE / LIEN

\$ 416040.00

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 415040.00

DOLLAR AMOUNT I AGREE TO PAY

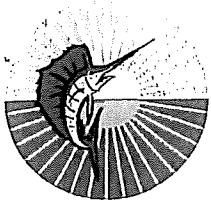
\$ 1,000



 Signature of Owner or Representative

2-6-19

 Date



THE SUNRISE CITY
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REQUEST FOR REDUCTION OF PENALTY

By completing this form, you are making statements under oath. Failure to be truthful is a violation of Fort Pierce City Code and Florida Statutes pertaining to perjury, which is a felony punishable by up to fifteen (15) years imprisonment.

INSTRUCTIONS:

1. Please fill in blanks completely.
2. Be specific when writing your statement. Use additional pages if necessary.
3. If you are claiming medical or financial hardship, attach supporting documentation (i.e. doctor's statement or proof of income).
4. Complete the appropriate application for lien reduction / rescindment.
5. For lot clearing or demolition liens, contact Kathy D'Arton in the Finance Department (772-467-3076) for cost / fees breakdown.
6. For code enforcement liens (those imposed by a Special Magistrate or Code Enforcement Board), contact Colleen Greer (772-467-3149) for cost / fees breakdown.
7. If you do not have access to a Notary Public, one will be provided to you by the Department at no charge. All forms must be signed in the presence of the Notary to be valid.
8. Return this form, the application and any other pertinent documentation to the Code Enforcement Department.
9. Requests for Reduction / Rescindment of code enforcement liens are governed by Rule 17 of the City's Rules & Regulation for Code Enforcement Board and Special Magistrate.

Property Address: 1108 Ave G, Fort Pierce, FL 34950

Property Owner: Carlson Family LLC

Mailing Address: 2103 Sunrise Blvd, Fort Pierce, FL 34950

Telephone #: 305-360-6262 Cell Phone #: 305-360-6262

E-Mail Address: Lnjacobson@hotmail.com

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

I, Noah Jacobson, do hereby submit this Petition in request for a reduction in the total amount of the penalty imposed and in support offer the following statement:

I am requesting the use of overage funds from the tax sale to be used in the fees incurred on this property.

I was unaware of these violations as they preptained to the previous owners. Asking for the lien to be reduced to Administrative + hard costs.

Date: 2-6-19

Signed: [Signature]

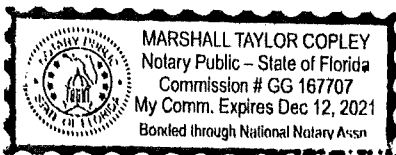
Print Name: Noah Jacobson

STATE OF FLORIDA

COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority Noah Jacobson who acknowledged before me that the information contained herein is true and correct. He or She is / is not personally known to me and has produced ID as identification.

SWORN TO AND SUBSCRIBED before me this 06 day of February, 2019.



[Signature]
Notary Public, State of Florida

OWNER / REPRESENTATIVE REQUEST TO PROCESS APPLICATION


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

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

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

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



Signature of Owner or Representative

2-6-19

Date

COFP – APPLICATION PROCESS DETERMINATION

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

Staff has reviewed the request for lien reduction and do not agree to process the application as requested by the signing party.

Comments:

City Representative

Date