

THE SUNRISE CITY  
**FORT PIERCE**  
CODE ENFORCEMENT

Florida

**REQUEST FOR A REDUCTION OR RESCINDMENT OF  
LOT CLEARING OR DEMOLITION LIEN**

Date:	11/7/19		
Property address:	1111 N 16 <sup>th</sup> ST		
Owner(s) of record:	VIRGINIA STEWART		
Mailing address:	5103 SAN DIEGO AVE, FP FL 34946		
Property tax ID #:	2404-809-0006-0001		
Original purchase date:	11/17/93	Original purchase price:	0
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:	SAME	Relationship to owner(s)	OWNER/HEIR
Telephone #:	772-461-0025	Mobile phone #:	882-2704 (772)
E-mail:		Preferred contact method:	
What are owner(s) intentions for property:	KEPT IN THE FAMILY		
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?	

City incurred charges (lot clearing, demolition, etc)

\$ 155.00

Administrative fees

\$ 16.02 16.02

Interest

\$ 306.68

Penalties

\$ 61.88

TOTAL AMOUNT DUE TO CITY

\$ 539.58

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 539.58

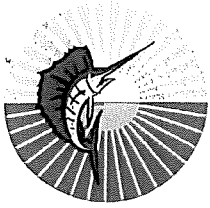
DOLLAR AMOUNT I AGREE TO PAY

\$ 0

*Virginia Lurry Stewart*  
Signature of Owner or Representative

11/7/2019  
Date

Virginia Lurry Stewart  
Printed Name



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: 1111 N 16<sup>th</sup> ST

Property Owner: VIRGINIA STEWART

Mailing Address: 5103 SAN DIEGO AVE, FP FL 34944

Telephone #: 772-461-0025 Cell Phone #: 772-882-2704

E-Mail Address: \_\_\_\_\_

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

I, VIRGINIA STEWART, 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:

THE LIEN WAS IN PLACE IN 1978 PRIOR TO MY  
FATHER PURCHASING THE PROPERTY. LIEN WAS NOT  
DISCOVERED WHEN THE SHIP PROGRAM CONDUCTED A SEARCH.

Date: 11/7/2019

Signed: Virginia Lurry Stewart

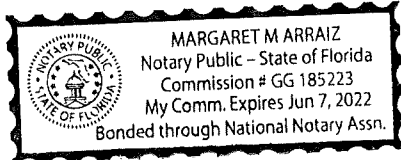
Print Name: Virginia Lurry Stewart

STATE OF FLORIDA

COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority VIRGINIA LURRY STEWART who acknowledged before me that the information contained herein is true and correct. He or She is / is not personally known to me and has produced FL DL S363-872-51-682-0 as identification.

SWORN TO AND SUBSCRIBED before me this 7<sup>th</sup> day of November, 2019.



Margaret M. Arraiz  
Notary Public, State of Florida

OWNER / REPRESENTATIVE REQUEST TO PROCESS APPLICATION

Property Address: 1111 N 16<sup>th</sup> ST

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(h), 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 considered and a determination made by the City Commission of the City of Fort Pierce.

Virginia Lurry Stewart      11/7/19      Virginia Lurry Stewart  
Signature of Owner or Representative      Date      Printed Name

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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. The matter will be placed before the City Commission for final determination.

Margaret M. Araiz      11/7/19      Margaret M. Araiz  
City Representative      Date      Printed Name