

APR 04 2019



THE SUNRISE CITY
FORT PIERCE
PLANNING DEPARTMENT
Florida

CITY OF FORT PIERCE
PLANNING & ZONING

Bldg. Permit # _____

COA# 19-24

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 704 Beach Ct., Fort Pierce, Florida
Parcel ID #: 241070901420008
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): Lori Dillon
Mailing Address: 704 Beach Ct., Fort Pierce, Florida
Phone Number(s): 772 359 9849 Email: LoriLDillon@aol.com

Applicant Name(s): Lori Dillon
Mailing Address: Same
Phone Number(s): _____ Email: _____

Representative Name(s): Wanda Gahn
Mailing Address: 8833 Lonesome Pine Trl, Ft. Pierce, FL
Phone Number(s): 772-465-9373 Email: wandagahn@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, Lori L Dillon as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.
[Signature] Signature of Owner 2-15-19 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 checked="" type="checkbox"/> Roof |
| <input type="checkbox"/> Window(s) | <input type="checkbox"/> Signage | <input type="checkbox"/> Shutter(s) | <input type="checkbox"/> Porch |
| <hr/> | | | |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition | <input type="checkbox"/> Relocation |

Site Improvements (describe) Re-roof

Other (describe) _____

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

Remove existing metal shingle roof and replace with peel-n-stick under layment
Install 26 ga 5-V crimp Mill finish metal roofing 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.

From: Wanda Gahn <wandagahn@aol.com>

To: wandagahn <wandagahn@aol.com>

Subject: Beach

Date: Thu, Apr 4, 2019 12:49 pm

Attachments: 3779.jpeg (965K), 3769.jpeg (993K), 3759.jpeg (808K), 3771.jpeg (770K)

Double Shingles

4 Attached Images



Wood Shakes under metal Shingles,



