



THE SUNRISE CITY

# FORT PIERCE

CODE ENFORCEMENT  
*Florida*

# 10-0099

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

Date:	9.4.19				
Property address:	814 S 6th St				
Owner(s) of record:	Vernon Dixon				
Mailing address:	4981 NW 15 St Lauderdale, FL 33313				
Property tax ID #:	2415-601-0458-000,0				
Original purchase date:		Original purchase price:			
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:	Vernon Dixon		Relationship to owner(s)		
Telephone #:	954 5887740		Mobile phone #:		
E-mail:			Preferred contact method:		
What are owner(s) intentions for property:	Plant to Live there				
Are there current code violations?	<input type="checkbox"/> No	<input checked="" 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 ...

\$ 827,780.00

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 824,780.00

DOLLAR AMOUNT I AGREE TO PAY

\$ 3000.00

Vernon Dixon  
Signature of Owner or Representative

9-24-19  
Date

I, \_\_\_\_\_, 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

Signed: *Vernon Dixon*  
Print Name: \_\_\_\_\_

Date: 9, 24 / 19

STATE OF FLORIDA  
COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority Vernon Dixon 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 Driver's License as identification.

SWORN TO AND SUBSCRIBED before me this 24th day of September, 2019.



*Colleen Greer*

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.

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.

*Kevin Don*  
Signature of Owner or Representative

9/24/19  
Date

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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.

Comments:

\_\_\_\_\_  
City Representative

\_\_\_\_\_  
Date

\_\_\_\_\_