



THE SUNRISE CITY
FORT PIERCE
 CODE ENFORCEMENT
Florida

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

Date:	11-4-2020			
Property address:	1211 N 19th Street, Ft. Pierce, FL 34950			
Owner(s) of record:	Andrea S. Dampier			
Mailing address:	3603 Avenue M, Ft. Pierce, FL 34950			
Property tax ID #:	2404-702-0129-000/1			
Original purchase date:	1-9-2020	Original purchase price:	N/A	
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:	Andrea S. Dampier	Relationship to owner(s):	Self	
Telephone #:		Mobile phone #:	(772) 216-6838	
E-mail:	Adampier7@gmail.com	Preferred contact method:	Phone/Email	
What are owner(s) intentions for property:				
Are there current code violations?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Explain: (please attached notice)	
Is property listed for sale?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	If yes, what is listing price?	\$79,900
Is property under contract for sale?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	If yes, what is the sale price?	\$79,900

AMOUNT OF FINE / LIEN


\$ 155,140.00

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 152,140.00

DOLLAR AMOUNT I AGREE TO PAY

\$ 3000.00 + Admin Fees


 Signature of Owner or Representative

11-4-2020
 Date

Andrea S. Dampier
 Printed Name



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: 1211 N 19th Street, Fort Pierce, FL 34950

Property Owner: Andrea S. Dampier

Mailing Address: 3603 Avenue M, Fort Pierce, FL 34947

Telephone #: _____ Cell Phone #: (772) 216-6838

E-Mail Address: Adampier7@gmail.com

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

I, Andrea S. Dampier, 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 took over the property locate at 1211 N 19th Street, Ft. Pierce, FL 34950 to help a relative that is currently incarcerated.
The property was willed to him by his Grandmother. I was asked to take over the property until he was released from prison, which I did but I was not made aware of the liens on the property when I agreed to this favor. He was released from prison but within less than a year he was arrested again. Due to myself soon relocating to another state and his release not looking so promising it is best that I sell the property.

Signed: 

Date: 11-4-2020

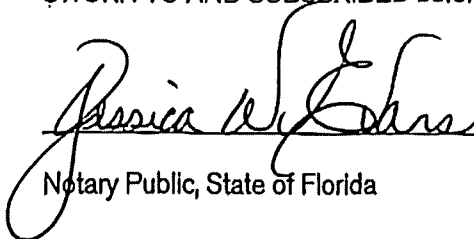
Print Name: Andrea S. Dampier

STATE OF FLORIDA

COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority Andrea S. Dampier 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 _____ as identification.

SWORN TO AND SUBSCRIBED before me this 4th day of November, 2020.


Notary Public, State of Florida



OWNER / REPRESENTATIVE REQUEST TO PROCESS APPLICATION

Property Address: 1211 N 19th Street, Ft. Pierce, FL 34950

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.



Signature of Owner or Representative

11-4-2020

Date

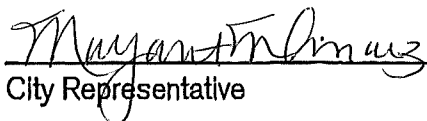
Andrea S. Dampier

Printed Name

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 either the Special Magistrate or Code Enforcement Board that authorized the Order Assessing Fine and Imposing Lien.



City Representative

11/17/20

Date

MARGARET M. ARRAN

Printed Name