



**CERTIFICATE OF APPROPRIATENESS**  
 TO ALTER A DESIGNATED HISTORIC SITE

COA#21-62     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 106 Avenue D

Contributing     Non-Contributing     Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Install 36" tall, wood, white porch railing and indigo blue windows shutters.  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

Board Approval

Administrative Approval

\_\_\_\_\_  
 Suzanne Boardman, Chair  
 Historic Preservation Board

\_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 Maria Lewicka, AICP  
 Historic Preservation Planner

10/21/21  
 \_\_\_\_\_  
 Date

*This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.*

*Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at [mlewicka@cityoffortpierce.com](mailto:mlewicka@cityoffortpierce.com).*

*Thank you for your efforts to preserve and redevelop historic Fort Pierce through your participation in the Certificate of Appropriateness Application process. Staff looks forward to working with you in the future to preserve and rehabilitate our historic neighborhoods and structures.*

Provided to:	Name/Address	Via
Owner/Applicant	Christian and Amy Andersen 106 Avenue D Fort Pierce, FL 34950	E-Mail <a href="mailto:amyandersenjh@gmail.com">amyandersenjh@gmail.com</a>



RECEIVED

OCT 20 2021

COA# 21-62

Bldg. Permit # \_\_\_\_\_

CITY OF FORT PIERCE  
PLANNING & ZONING

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 106 Avenue D Fort Pierce FL 34950

Parcel ID #: \_\_\_\_\_

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): Andersen, Christian + Amy

Mailing Address: 106 Avenue D Fort Pierce FL 34950

Phone Number(s): (307) 690-7020 Email: amyandersenjh@gmail.com  
(307) 690-4669

#### Applicant

Name(s): Amy Andersen

Mailing Address: 106 Avenue D Fort Pierce FL 34950

Phone Number(s): (307) 690-7020 Email: amyandersenjh@gmail.com

#### Representative

Name(s): N/A

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**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, Amy/Christian Andersen as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Amy Andersen  
Signature of Owner  
Christian J Andersen

10/17/21  
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 type="checkbox"/> Roof             |
| <input type="checkbox"/> Window(s)      | <input type="checkbox"/> Signage          | <input checked="" type="checkbox"/> Shutter(s) | <input checked="" type="checkbox"/> Porch |
| <hr/>                                   |   |  |   |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition            | <input type="checkbox"/> Relocation       |

- Site Improvements (describe) install small porch railing/shutters on windows
- Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: ① a prox 30' (lineal) white porch railing 36" tall. Wood material.

② Shutters for exterior windows 14.5" X 63" vinyl or wood louvered. Indigo blue in color

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.







## Jennifer Hofmeister

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**From:** amy andersen <amyandersenj@gmail.com>  
**Sent:** Wednesday, October 20, 2021 11:44 AM  
**To:** Jennifer Hofmeister  
**Subject:** Andersen COA 106 Avenue D  
**Attachments:** 20211019\_115350.jpg

**SECURITY WARNING:** This email originated outside of the City of Fort Pierce systems. Please use caution when clicking links or opening attachments. For questions or concerns please contact IT immediately. .

Hello Maria

Thank you for your call this morning.

The shutters Christian and I would like are pictured in the attachment. I hope you can enlarge the pic. These would be working or functional shutters with hinges.

14.5" X 63". Wood. Indigo blue in color and we would like to paint our front door same color.

Our handyman will make them. Our neighbor to west has similar shutters.

Please let me know if you require further information.

Best Regards

Amy Andersen

(307)690-7020



**CERTIFICATE OF APPROPRIATENESS**  
 TO ALTER A DESIGNATED HISTORIC SITE

COA#21-63     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 311 S 8<sup>th</sup> Street

Contributing     Non-Contributing     Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Remove existing roof. Install new 5V Crimp metal roof.  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

*Board Approval*

*Administrative Approval*

\_\_\_\_\_  
 Suzanne Boardman, Chair  
 Historic Preservation Board

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Maria Lewicka, AICP  
 Historic Preservation Planner

\_\_\_\_\_  
 10/29/21  
 Date

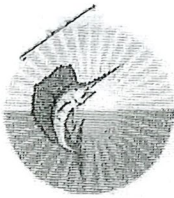
*This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.*

*Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at [mlewicka@cityoffortpierce.com](mailto:mlewicka@cityoffortpierce.com).*

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Provided to:	Name/Address	Via
Owner	Kolyma Partners LLC 2505 S Central Blvd, Ste 205 Jupiter, FL 33458	E-Mail <a href="mailto:Wlsjr27@yahoo.com">Wlsjr27@yahoo.com</a>
Applicant	Daniel Williams 1813 N 17 <sup>th</sup> Street Fort Pierce, FL 34950	E-Mail <a href="mailto:Prezidentialroofingllc@gmail.com">Prezidentialroofingllc@gmail.com</a>





Bldg. Permit # 21-000055

COA# 21-63

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 311 S. 8th St  
 Parcel ID #: 2410-706-0049-000-7  
 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): Kolyma Partners LLC  
 Mailing Address: 2505 Central Blvd Ste 205 Jupiter, FL 3345  
 Phone Number(s): 954-658-8154 Email: wlsjr27@yahoo.com

Applicant  
 Name(s): Daniel Williams (Prezidential's Roofing LLC)  
 Mailing Address: 1813 N 17th St Fort Pierce, FL 34950  
 Phone Number(s): 772 353 5565 Email: Prezidentialroofingllc@gmail.com

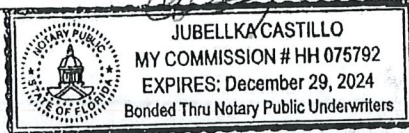
Representative  
 Name(s): \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

*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, William Snyder as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

10/21/21  
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           |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition | <input type="checkbox"/> Relocation      |

- Site Improvements (describe) Reroof
- Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: Removal of existing roof & install new underlayment and 5v Chimp Metal

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.









**CERTIFICATE OF APPROPRIATENESS**  
 TO ALTER A DESIGNATED HISTORIC SITE

COA#21-64     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 1423 Avenue D

Contributing     Non-Contributing     Individually Designated

**SITE ALTERATIONS:**

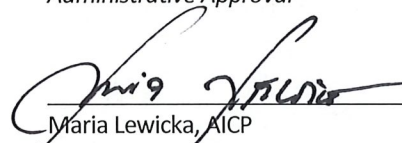
Request	Conditions	Applicable Standards
Remove existing roof. Install 5V metal roof.  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

*Board Approval*

*Administrative Approval*

\_\_\_\_\_  
 Suzanne Boardman, Chair                      Date  
 Historic Preservation Board

  
 \_\_\_\_\_                      10/29/21  
 Maria Lewicka, AICP                      Date  
 Historic Preservation Planner

*This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.*

*Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at [mlewicka@cityoffortpierce.com](mailto:mlewicka@cityoffortpierce.com).*

*Thank you for your efforts to preserve and redevelop historic Fort Pierce through your participation in the Certificate of Appropriateness Application process. Staff looks forward to working with you in the future to preserve and rehabilitate our historic neighborhoods and structures.*

Provided to:	Name/Address	Via
Owner/Applicant	Vincent Marcellino 5625 NW Wawan Court Port St Lucie, FL 34986	E-Mail



# CITY OF FORT PIERCE

## PLANNING DEPARTMENT

COMPREHENSIVE PLANNING ♦ DEVELOPMENT REVIEW  
HISTORIC PRESERVATION ♦ URBAN DESIGN ♦ URBAN FORESTRY ♦ ZONING

### Certificate of Appropriateness Application

OCT 29 2021

#### Building & Site Information

Address of the Site: 1423 Ave D.  
Parcel ID #: 2409-503-0030-000-4  
Type of Designation:  Contributing  Non-contributing Site within the \_\_\_\_\_ Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

CITY OF FORT PIERCE  
PLANNING & ZONING

#### Property Owner/ Applicant Information

Property Owner(s)  
Name(s): Vincent Marcellino  
Mailing Address: 5625 NW Wawan Ct.  
Phone Number(s): 954-914-4090 Email: \_\_\_\_\_

Applicant  
Name(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Representative  
Name(s): \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

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I / We, Vincent Marcellino as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

10/28/21  
Date

**Description of Requested Work**

Please indicate the type of work requested:

- Fence                       Shed                       Door(s)                       Roof
- Window(s)                       Signage                       Shutter(s)                       Porch

---

- Rehabilitation                       New Construction                       Demolition                       Relocation

Site Improvements (describe) \_\_\_\_\_

Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: Tear off existing roof and install new SV metal roof

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.

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- Demolition - Plans for what will be taking the demolished structure's place should be submitted.





**CERTIFICATE OF APPROPRIATENESS**  
 TO ALTER A DESIGNATED HISTORIC SITE

COA#21-65     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address: 1004 Avenue D

Contributing     Non-Contributing     Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Replace two (2) exterior doors.  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

*Board Approval*

*Administrative Approval*

\_\_\_\_\_  
 Suzanne Boardman, Chair                      Date  
 Historic Preservation Board

  
 \_\_\_\_\_    10/29/21  
 Maria Lewicka, AICP    Date  
 Historic Preservation Planner

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Provided to:	Name/Address	Via
Owner	Fenee' L Russ 1805 N 16 <sup>th</sup> Street Fort Pierce, FL 34950	E-Mail <a href="mailto:flruss@att.net">flruss@att.net</a>
Applicant	Andros Construction, LLC 2706 Atlantic Avenue Fort Pierce, FL 34947	E-Mail <a href="mailto:androsConstruction@gmail.com">androsConstruction@gmail.com</a>



# CITY OF FORT PIERCE

## PLANNING DEPARTMENT

RECEIVED

OCT 29 2021

COMPREHENSIVE PLANNING ◊ DEVELOPMENT REVIEW  
HISTORIC PRESERVATION ◊ URBAN DESIGN ◊ URBAN FORESTRY ◊ ZONING

CITY OF FORT PIERCE  
PLANNING & ZONING

# Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 1004 AVENUE D

Parcel ID #: 2409-501-0131-000-6

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): FENEÉ RUSS

Mailing Address: 1805 N 16<sup>TH</sup> ST, FT PIERCE, FL 34950

Phone Number(s): 561-358-1522 Email: FENEÉ; FLRUSS@ATT.NET

Applicant Name(s): ANDROS CONSTRUCTION, LLC

Mailing Address: 2706 ATLANTIC AVE  
FORT PIERCE, FL 34947

Phone Number(s): 772-495-4915 Email: ANDROS.CONSTRUCTION@GMAIL.COM

Representative Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**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, Feneé Russ as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Feneé Russ  
Signature of Owner

10/04/2021  
Date

**Description of Requested Work**

Please indicate the type of work requested:

- Fence
- Window(s)
- Shed
- Signage
- Door(s)
- Shutter(s)
- Roof
- Porch

- Rehabilitation
- New Construction
- Demolition
- Relocation

- Site Improvements (describe) The Change out OF The E \* S Exit Doors ONLY.
- Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: The Change out OF THE ONLY TWO EXITS DOORS, ONE @ The E The OTHER @ The SEnd OF This Building.  
"This is an AFTER THE FACT PERMIT"

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.
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  - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
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- Material(s) specifications and/or sample(s)
- Color samples.
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