



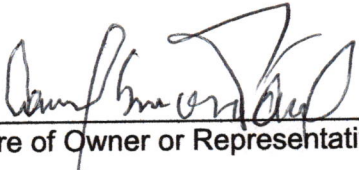
JAN 11 2022

CITY OF FORT PIERCE
COMMUNITY RESPONSE
Code Enforcement &
Animal Control

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

Date:	01/10/22				
Property address:	121 n 12th st				
Owner(s) of record:	simon castor				
Mailing address:	207 dixieland dr fort pierce fl				
Property tax ID #:	2409 517 0021 000 1				
Original purchase date:	nov 2nd 2020	Original purchase price:	5,300.00		
Property is used for:	<input 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:	simon castor		Relationship to owner(s)		
Telephone #:	772 528 5202		Mobile phone #:	772 528 5202	
E-mail:	castors_ac@yahoo.com		Preferred contact method:	email	
What are owner(s) intentions for property:	building				
Amount of Lien:	3490		Date Fine Initiated:	n/a	
Are there current code violations?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	Explain: (please attached notice) grass cutting		
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	\$ <u>3,490.00</u>
DOLLAR AMOUNT REQUESTING TO BE WAIVED	\$ <u>2,890.00</u>
DOLLAR AMOUNT I AGREE TO PAY	\$ <u>600.00</u>



Signature of Owner or Representative

01/10/22

Date

simon castor

Printed Name

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CITY OF FORT PIERCE
COMMUNITY RESPONSE
Code Enforcement &
Animal Control

CITY OF FORT PIERCE
CODE ENFORCEMENT



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

Date		01/10/23	
Property address		121 n 12th st	
Owner(s) of record		simon castor	
Listing address		207 dixieland dr fort pierce fl	
Property tax ID #		2408 817 0021 000 1	
Original purchase date		Nov 2nd 2020	
Original purchase price		\$300.00	
Property is listed for		<input 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		simon castor	
Relationship to owner(s)			
Telephone #		772 828 8202	
Mobile phone #		772 828 8202	
E-mail		castors_ac@yahoo.com	
Preferred contact method		email	
What are owner(s) intentions for property		building	
Amount of Lien		3490	
Date Fine Imposed		N/A	
Are there current code violations?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Is property listed for sale?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is property under contract for sale?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
If yes, what is the sale price?			
If yes, what is listing price?			
Explicit (please checked notes)		gross cutting	

AMOUNT OF FINE / LIEN
 \$3,490.00
 DOLLAR AMOUNT REQUESTING TO BE WAIVED
 \$2,890.00
 DOLLAR AMOUNT I AGREE TO PAY
 \$600.00

simon castor
Printed Name

01/10/23
Date

Signature of Owner or Representative

OWNER / REPRESENTATIVE REQUEST TO PROCESS APPLICATION

Property Address: _____

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 administratively through the Rules of Procedure Sec. 17(d), I understand the requirements to be met and understand that the Special Magistrate will make the final determination.

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.

Simon Castor 1/11/22 simon castor
Signature of Owner or Representative Date 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 the City Commission for final determination.

Margaret M. Anquez 2/10/22 Margaret M. Anquez
City Representative Date Printed Name

OWNER A REPRESENTATIVE REQUEST TO PROCESS APPLICATION

Property Address

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 Magistrate 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 administratively through the Rules of Procedure Sec 17(b). I understand the requirements to be met and understand that the Special Magistrate will make the final determination.

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.

simon castor
Printed Name

Date

Signature of Owner or Representative

CORP - 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.

MICHAEL M. HARRIS
Printed Name

Date

City Representative



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CITY OF FORT PIERCE
COMMUNITY RESPONSE
Code Enforcement &
Animal Control

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 Katherine Calderon (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: 1810 Tucker Ct

Property Owner: Simon Oastor

Mailing Address: 207 Dixieland Dr Fort Pierce Fl 34982

Telephone #: 772 528 5202 Cell Phone #: 772 528 5202

E-Mail Address: Oastors_ac@yahoo.com

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

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JAN 1 1 2013

CITY OF FORT PIERCE
COMMUNITY RESPONSE
Code Enforcement &
Animal Control

MEMORANDUM FOR THE CITY OF FORT PIERCE
COMMUNITY RESPONSE

TO: [Illegible]

FROM: [Illegible]

SUBJECT: [Illegible]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]

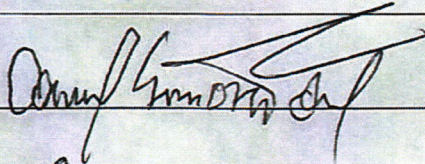
[Illegible text]

[Illegible text]

I, Simon Castor, 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:

My money is tied up in the restoration of the site on 2108 Ave G; with I cannot sell before cleaning those liens on Tucker E. 12th St on that I am asking ^{you} to agree to my request for I cannot pay the amount impose by the City.

Date: 1/11/22

Signed: 

Print Name: Simon Castor

STATE OF FLORIDA

COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority _____ 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 _____ day of _____, 20____.

Notary Public, State of Florida