



CERTIFICATE OF APPROPRIATENESS
 TO ALTER A DESIGNATED HISTORIC SITE

COA#22-04 HISTORIC PRESERVATION BOARD APPROVAL ADMINISTRATIVE APPROVAL

Site address: 519 S 2nd Street

Contributing Non-Contributing Individually Designated

SITE ALTERATIONS:

Request	Conditions	Applicable Standards
Remove singles and install JA TAYLOR EDGE-LOC Metal Roof System over polyglass MTS self-adhered underlayment. 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


 _____ 01/31/22
 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.

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	John Essen 519 S 2 nd Street Fort Pierce, FL 34950	E-Mail ahabsticket@yahoo.com
Applicant	J.A. Taylor Roofing, Inc. 302 Melton Drive Fort Pierce, FL 34982	E-Mail ashley@jataylorroofing.com

Bldg. Permit # _____

COA# 22-04



CITY OF FORT PIERCE

PLANNING DEPARTMENT

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

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 519 S 2ND ST, FORT PIERCE
Parcel ID #: 2410-810-0004-000-0
Type of Designation: Contributing Non-contributing Site within the EDGAR TOWN DISTRICT Historic District
 Individually Designated Site, City Commission Resolution No. _____

Property Owner / Applicant Information


Property Owner(s)
Name(s): JOHN ESSEN
Mailing Address: 519 S 2ND ST, FORT PIERCE FL 34950
Phone Number(s): 772-726-7315 Email: ahabsticket@yahoo.com

Applicant
Name(s): J.A. TAYLOR ROOFING INC
Mailing Address: 302 MELTON DR, FT PIERCE FL 34982
Phone Number(s): 772-466-4040 Email: ASHLEY@JATAYLORROOFING.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, JOHN ESSEN as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.


Signature of Owner

1/10/2022
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) RE-ROOF

Other (describe) _____

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

TEAR OFF SHINGLE, RENAIL DECK, INSTALL JA TAYLOR EDGE-LOC METAL ROOF SYSTEM OVER POLYGLASS MTS SELF-ADHERED UNDERLAYMENT

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.

Survey (New Construction)

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. *Mill Finish*

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





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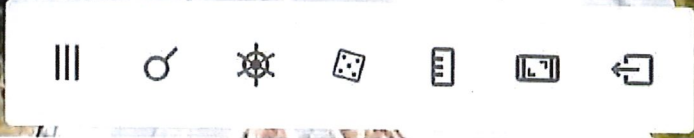
519 S 2nd St, Fort + Pierce, FL 34950





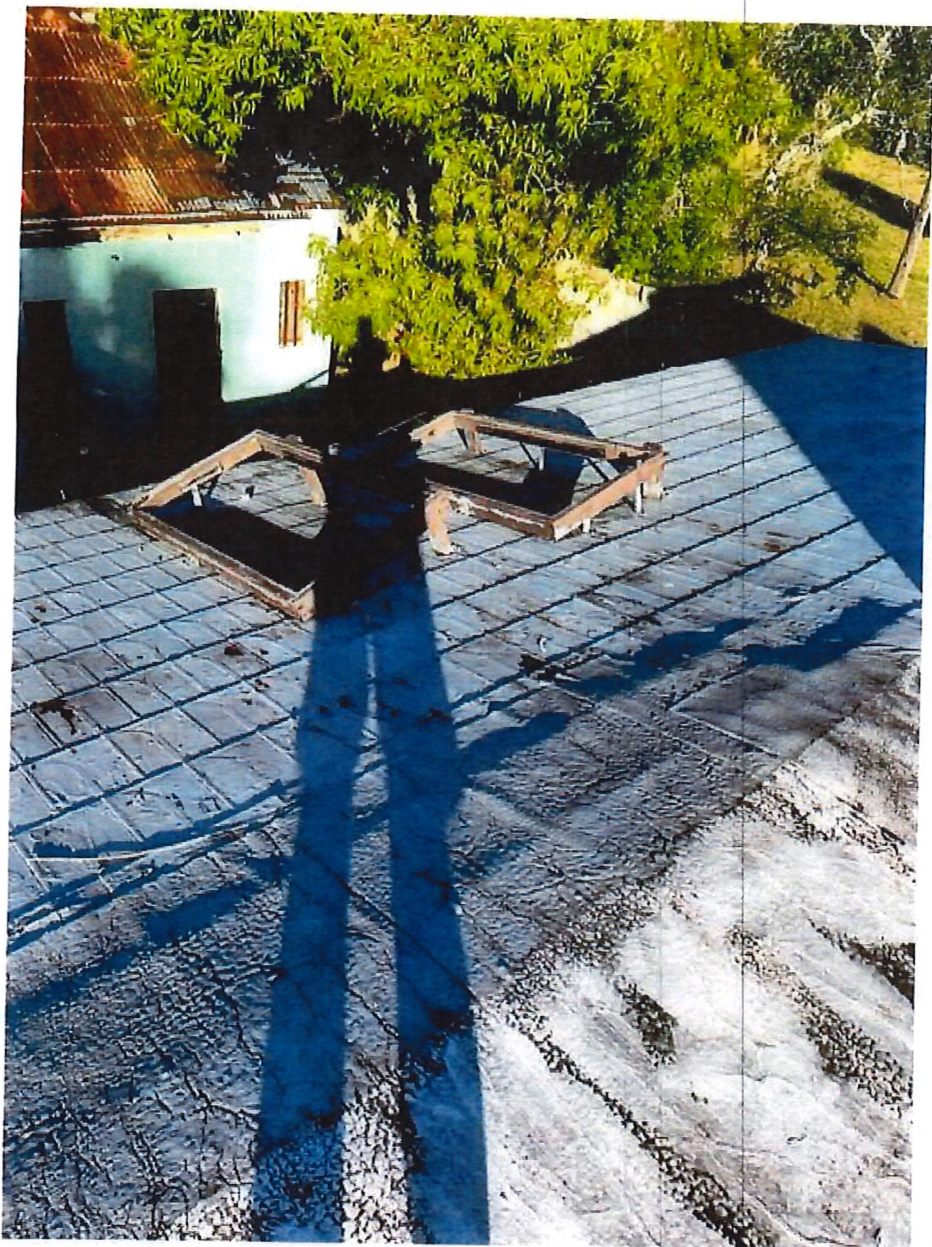




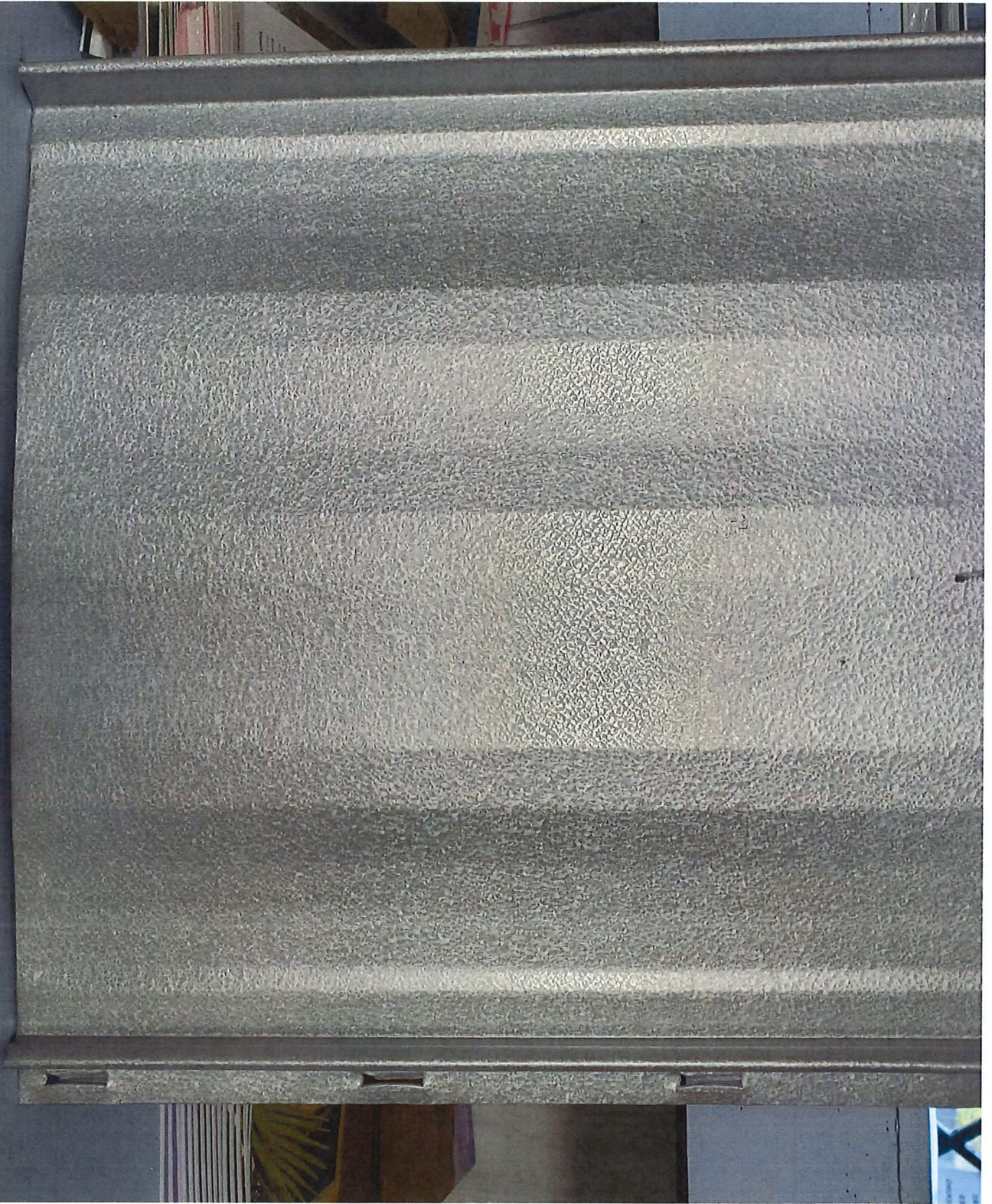


519 S 2nd St
Building











CITY OF FORT PIERCE

PLANNING DEPARTMENT

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

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 225 Orange Ave &
Parcel ID #: 2410-507-0008-000-7
Type of Designation: Contributing Non-contributing Site within the YES Historic District
 Individually Designated Site, City Commission Resolution No. _____

Property Owner/ Applicant Information

Property Owner(s) Name(s): KDK Properties LLC
Mailing Address: 4315 Thousand Pines Dr. Fort Pierce FL 34981
Phone Number(s): 772-370-5140 Email: hello@varsitysportshop.com / dgibbons4315@gmail.com

Applicant Name(s): KDK Properties LLC
Mailing Address: _____
Phone Number(s): _____ Email: _____

Representative Name(s): Don Hinkle Construction LLC (Rick Friedrich)
Mailing Address: 246 Bimini Dr Ft. Pierce, FL 34949
Phone Number(s): 772-370-6580 Email: dhconstructionbids@outlook.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, Kristina & Derrick Gibbons as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Kristina Gibbons
Signature of Owner

12/20/21
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) Replacing windows in building

Other (describe) _____

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

We will be replacing all windows affiliated with the parcel ID 2410-507-0008-000-7 and installing impact windows.

All windows and trim will be white to match existing building.

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.

Maria Lewicka

From: Rick Friedrich <DHConstructionBids@outlook.com>
Sent: Wednesday, January 5, 2022 12:29 PM
To: Maria Lewicka
Subject: Gibbons Window Project
Attachments: Application Windows Gibbons.pdf; 7700A Series Impact (1).pdf

You don't often get email from dhconstructionbids@outlook.com. [Learn why this is important](#)

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. .

Good afternoon,

Can you please review and sign off to replace the existing windows in this building. They will be the same color, shape and size just impact.

Thanks
Rick Fredrich
772-370-6580
DHC INC.





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