

THE SUNRISE CITY  
**FORT PIERCE**  
CODE ENFORCEMENT  
*Florida*

**RECEIVED**

JAN 11 2022

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

CITY OF FORT PIERCE  
COMMUNITY RESPONSE  
Code Enforcement &  
Animal Control

Date:	01/10/22				
Property address:	1810 tucker court				
Owner(s) of record:	simon castor				
Mailing address:	207 dixieland dr fort pierce fl				
Property tax ID #:	2409 712 0009 000 0				
Original purchase date:	01/08/2018	Original purchase price:	5 to 6,000.00		
Property is used for:	<input type="checkbox"/> Single Family	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input checked="" 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:	13,300.00		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

\$ 13,300

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 12,900.00

DOLLAR AMOUNT I AGREE TO PAY

\$ 400.00

Signature of Owner or Representative

01/10/22

Date

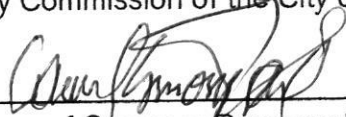
simon castor

Printed Name

OWNER / REPRESENTATIVE REQUEST TO PROCESS APPLICATION

Property Address:	1810 tucker ct
-------------------	----------------

- 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.

  
\_\_\_\_\_  
Signature of Owner or Representative

1/11/22  
\_\_\_\_\_  
Date

simon castor  
\_\_\_\_\_  
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.

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name



THE SUNRISE CITY  
**FORT PIERCE**  
CODE ENFORCEMENT  
*Florida*

RECEIVED

JAN 11 2007

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:**

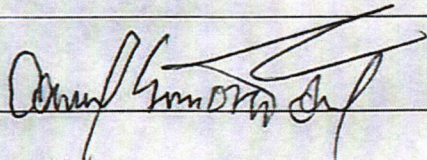
1. Please fill in blanks completely.
2. Be specific when writing your statement. Use additional pages if necessary.
3. If you are claiming medical or financial hardship, attach supporting documentation (i.e. doctor's statement or proof of income).
4. Complete the appropriate application for lien reduction / 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 Castor  
Mailing Address: 207 Dixieland Dr Fort Pierce Fl 34982  
Telephone #: 772 528 5202 Cell Phone #: 772 528 5202  
E-Mail Address: Castors\_ac@yahoo.com  
Is the property in compliance? yes If no, please explain in the narrative of your request.

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; which I cannot sell before cleaning those liens on Tucker E. 12th St on that I am asking <sup>you</sup> 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