



**RECEIVED**

APR 5 2023

CITY OF FORT PIERCE  
COMMUNITY RESPONSE  
Code Enforcement &  
Animal Control

**REDUCTION OF LIEN APPLICATION**

A separate application must be submitted for each lien type.

When completing the application form, only complete the amounts due for the request type.

Date:	4/5/2023				
Property address:	506-508 N 17 <sup>th</sup> St				
Owner(s) of record:	Mary J Constant, Lloyd M Constant				
Mailing address:	2706 ATLANTIC AV, FORT PIERCE, FL 34947				
Property tax ID #:	2409-122-0013-000-0				
Original purchase date:		Original purchase price:			
Property is used for:	<input checked="" 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:	Lloyd M. Constant		Relationship to owner(s)	OWNER.	
Telephone #:	772-475-4915		E-Mail:	ANDROS.CONSTRUCTION@GMAIL.COM	
Type of Lien	<input type="checkbox"/> Code Enforcement	<input checked="" type="checkbox"/> Lot Clearing / Nuisance Abatement		<input type="checkbox"/> Demolition	

TYPE OF FEE	AMOUNT DUE	AMOUNT OFFERED
Daily fine total (CODE LIENS ONLY)	\$ _____	\$ _____
Recording Fees	\$ 21.15	\$ 10.58
City incurred fees (MAY NOT BE REDUCED) <i>HARD COST</i>	\$ 4,042.80	\$ 4,042.80
Administrative Fees	\$ 2,680.00	\$ 1,340.00
Interest	\$ 8,824.38	\$ 4,412.19
Penalties	\$ 1,737.44	\$ 868.72
<b>TOTAL AMOUNT</b>	<b>\$ 17,305.77</b>	<b>\$ 10,674.29</b>

*Lloyd M. Constant*      4-5-2023      Lloyd M. Constant  
Signature of Owner or Representative      Date      Printed Name



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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.

All requests for a reduction of a lien must comply with the following:

1. All code enforcement liens must be complied prior to the Department accepting the request.
2. The request must be made by the owner. If the request is made by any other interested party, written proof of permission to act on the owner's behalf must be provided.
3. You must provide a copy of your deed. If title was transferred via Special Warranty Deed or Warranty Deed, you are responsible for contacting the guaranteeing party to have the lien addressed.
4. Be specific when completing your statement. If you are claiming medical or financial hardship, attach supporting documentation (i.e. doctor's statement or proof of income). Use extra pages if necessary.
5. Complete the application form and attach to your request. Multiple applications may be submitted with each request.
6. An application fee of \$250.00 per request shall be applied when the request is finalized.
7. Requests for reduction of all liens imposed by the City of Fort Pierce are governed by Rule 15 of the City's Rules & Regulation for the Special Magistrate. A copy of the rule is attached to the application for your reference. A full copy of the Rules & Regulations can be found on the City's website or can be provided upon request.

Property Address: 506-508 N 17TH ST

Parcel ID #: 2409-1220013-000-0

Property Owner: Lloyd & Mary CONSTANT

Mailing Address: 2706 ATLANTIC AVE, FT. PIERCE FL 34947

Telephone #: 772-834-3362 Cell Phone #: 772-475-4915

E-Mail Address: ANDROSCONSTRUCTION@GMAIL.COM

Number of Applications: 1.

REQUEST FOR REDUCTION OF PENALTY –STATEMENT

I, Lloyd M. Constant, do hereby affirm that I am the owner of the property identified on this request or have provided proof from the owner to act on his/her behalf. I submit this statement in request for a reduction of the penalty imposed and in support offer the following:

- 1. A number of organizations have used and are using this property for community events/services.
- 2. By keeping this property clean & open have help with and will continue to help in safety of temp parking during events.
- 3. Until we decide to build on this property, we will continue to keep it clean and accessible to the public.

PLEASE INITIAL:

LMC

I acknowledge that I have been provided a copy of Rule 15 of the Rules of Procedure for the Special Magistrate.

I am requesting that my application for lien reduction be processed administratively through the Rules of Procedure Sec. 15(B). I understand the requirements to be met and that I waive my right to a hearing before the Special Magistrate.

LMC

I am requesting that my application for lien reduction be considered, and a determination made by the Special Magistrate

Signature: 

Date: 4-5-2023

FOR OFFICE USE ONLY:

RECEIVED DATE: 4/5/2023

OWNERSHIP INFORMATION:

Copy of deed provided       Proof of proxy      YES / NO

*OK JP*

REDUCTION TYPE:

Code lien # \_\_\_\_\_       Nuisance abatement lien # 1       Demolition lien # \_\_\_\_\_

REQUEST TYPE:

Fast Track       Special Magistrate Review / Hearing date: \_\_\_\_\_