



THE SUNRISE CITY
FORT PIERCE
 BUILDING DEPARTMENT
Florida

REQUEST FOR A REDUCTION OR RESCINDMENT OF
 BUILDING VIOLATION FINES

Date:	6/21/23		
Property address:	2405 SUNRISE BLVD, Fort Pierce		
Owner(s) of record:	PINK SUNRISE LLC		
Mailing address:	1750 NE 191 ST ST # 809, MIAMI, FL, 33179		
Property tax ID #:	2421-503-0019-000-9		
Original purchase date	11/12/2021	Original purchase price:	\$ 115,000
Property is used for:	<input checked="" 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:	ADRIANA KOZMA	Relationship to owner(s)	OWNER
Telephone #:	305 798 0680	Mobile phone #:	305 798 0680
E-mail:	AdrianaKozma@yahoo.com	Preferred contact method:	PHONE
What are owner(s) intentions for property:	TO KEEP IT		
Are there current code violations?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Explain: (please attached notice) VIOLATIONS WERE CORRECTED
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

\$ 5630

DOLLAR AMOUNT REQUESTING TO BE WAIVED

\$ 5630

DOLLAR AMOUNT I AGREE TO PAY

\$ 0

AKozma
 Signature of Owner or Representative

6/21/23
 Date

REQUEST FOR REDUCTION OF PENALTY FOR BUILDING VIOLATIONS

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 Colleen Greer (772-467-3149) for cost / fees breakdown.
7. For building violation liens (those imposed by a Special Magistrate or Code Enforcement Board), contact Elizabeth Beck (772-467-3718) for cost / fees breakdown.
8. 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.
9. Return this form, the application and any other pertinent documentation to the Building Department.
10. Requests for Reduction / Rescindment of building violation liens are governed by Rule 17 of the City's Rules & Regulation for Code Enforcement Board and Special Magistrate.

Property Address: 2405 SUNRISE BLVD.
Property Owner: PINK SUNRISE LLC
Mailing Address: 1750 NE 191ST ST # 809, MIAMI, FL
Telephone #: 305 7980680 Cell Phone #: 305 7980680
E-Mail Address: ADRIANAKOZMA@YAHOO.COM

Is the property in compliance? YES If not, please explain in the narrative of your request.

I, ADRIANA KOZMA, 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:

Your Honor,

Please grant me a reduction of fines incurred at 2405 Sunrise Bl. When I hired Mr. Albert Wagner, G.C., I gave him a copy of the violation with the timeline that needed to be met, I insisted we hurry and submit the needed documents for the permit but unfortunately they were only sent the day we supposed to have the permits already and I was fully dependent on him to perform. Another delay was caused by not being available on 12/20/22 hearing due to traveling and could only make the 11/17/23 hearing for the fines to stop acquiring. Thank you for understanding.

Signed: *Adriana* Date: 6/21/23

Print Name: ADRIANA KOZMA

STATE OF FLORIDA
COUNTY OF ST. LUCIE

PERSONALLY APPEARED before me, the undersigned authority ADRIANA KOZMA 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 FLORIDA DRIVER'S LICENSE as identification.

SWORN TO AND SUBSCRIBED before me this 21ST day of JUNE, 20 23.

Yaremi Aparicio
Notary Public, State of Florida

