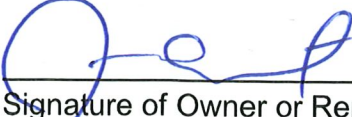


REDUCTION OF LIEN APPLICATION

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:	9/19/2023				
Property address:	409 Cedar PL				
Owner(s) of record:	Cedar Place LLC				
Mailing address:	10570 S US HWY 1 STE 300 PORT ST LUCIE FL 34952				
Property tax ID #:	2403-705-0135-000-2				
Original purchase date:	8-7-2023	Original purchase price:			
Property is used for:	<input type="checkbox"/> Single Family	<input type="checkbox"/> Multi-family	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Vacant Lot
Name of person requesting reduction:	JACQUES CHESTER	Relationship to owner(s)	OWNER		
Telephone #:	407 765 5730	E-Mail:	JACQUES.CHESTER@CBREALTY.COM		
Type of Lien	<input checked="" type="checkbox"/> Code Enforcement	<input type="checkbox"/> Lot Clearing / Nuisance Abatement	<input type="checkbox"/> Demolition		

TYPE OF FEE	AMOUNT DUE	AMOUNT OFFERED
Daily fine total (CODE LIENS ONLY) <u>Case# 09-1414</u>	\$ 377,550.00	\$ <u>0</u>
Recording Fees	\$ 40.00	\$ <u>0</u>
City incurred fees (MAY NOT BE REDUCED)	\$ _____	\$ <u>0</u>
Administrative Fees	\$ _____	\$ <u>0</u>
Interest	\$ _____	\$ <u>0</u>
Penalties	\$ _____	\$ <u>0</u>
TOTAL AMOUNT	\$ 377,590.00	\$ <u>0</u>


9-20-23
JACQUES CHESTER
 Signature of Owner or Representative Date Printed Name



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: 409 CEDAR PL

Parcel ID #: 2403 705 0135 000 2

Property Owner: CEDAR PLACE LLC

Mailing Address: ~~100~~ 10570 S US #1 STE 300 PORT ST LUCIE 34952

Telephone #: 407 765 5730 Cell Phone #: _____

E-Mail Address: JACQUES, CHESTER@CBREALTY.COM

Number of Applications: 1

REQUEST FOR REDUCTION OF PENALTY - STATEMENT

I, LEDAR PLACE LLC/JACQUES CHESTER, 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:

REMOVE ALL LIENS AND GIVE 18 MONTHS TO REMEDY ALL OF THE VIOLATIONS ATTACHED TO THE SUBJECT PROPERTY. WORK RELATED PERMITS MUST BE PULLED WITHIN 60 DAYS OF THE HEARING. NEW OWNER WILL REAPPEAR IN FRONT OF THE SPECIAL MAGISTRATE EVERY 6 MONTH TO SHOW PROGRESS.

PLEASE INITIAL:

JL

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.

JL

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

Signature: *JL*

Date: 9-20-23

FOR OFFICE USE ONLY:	RECEIVED DATE: <u>9/25/23</u>	<i>Att of CM recorded</i>
OWNERSHIP INFORMATION:		
<input checked="" type="checkbox"/> Copy of deed provided	<input type="checkbox"/> Proof of proxy	YES / NO
REDUCTION TYPE:		
<input checked="" type="checkbox"/> Code lien # <u>1</u>	<input type="checkbox"/> Nuisance abatement lien # _____	<input type="checkbox"/> Demolition lien # _____
REQUEST TYPE:		
<input type="checkbox"/> Fast Track	<input type="checkbox"/> Special Magistrate Review / Hearing date: <u>11/1/2023 1:30pm</u>	

DENIED. PER RULE 15 NO RFR MAY BE ACCEPTED UNTIL ALL VIOLATIONS ARE COMPLETED.

Sunbelt Title Agency
Prepared by and Return to:

Rosa Ghent
Sunbelt Title Agency
500 N. Westshore Blvd., Suite 870
Tampa, FL 33609
File Number: 1740523-06735

[Space Above This Line For Recording Data]

This Warranty Deed

Made this 7th day of August, 2023 by CEPHUS W. CRUICKSHANK a/k/a CEPHUS CRUICKSHANK, A Married Man, hereinafter called the Grantor, to CEDAR PLACE LLC, A Florida Limited Liability Company, whose post office address is: 10570 S. US Highway 1, Suite 300, Port St. Lucie, FL 34952, hereinafter called the Grantee:

(Whenever used herein the term "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the Grantor, for and in consideration of the sum of Ten Dollars (\$10.00) and other valuable consideration, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situated in St. Lucie County, Florida, viz:

Lots 10 and 12, Block 16-K, ASSESSOR'S MAP OF NORTH PART OF FORT PIERCE, according to the plat thereof, recorded in Plat Book 1, Page 164, of the Public Records of St. Lucie County, Florida. (As to 409 Cedar Place)

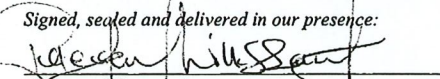
Parcel Identification Number: 2403-705-0135-000/2

Said property is not the homestead of the Grantor(s) under the Laws and Constitution of the State of Florida in that neither Grantor(s) nor any member of the household of Grantor(s) reside thereon.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining. To Have and to Hold, the same in fee simple forever.

And the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land; that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances. Subject to covenants, restrictions, easements of record and taxes for the current year and subsequent years.

In Witness Whereof, the said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Witness: (Signature)
Print Name: INQUEL LOUSSANT

CWC SA By CWC JA
CEPHUS W. CRUICKSHANK by CEPHUS
CRUICKSHANK, his Attorney-in-Fact
2312 N. 44th Street
Fort Pierce, FL 34946


Witness: (Signature)
Print Name: ROSA GHENT

State of Florida
County of St. Lucie

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization, this 7th day of August, 2023, by CEPHUS CRUICKSHANK, who: [] is personally known to me or [] produced FL DL as identification.


NOTARY PUBLIC (signature)
Print Name: Rosa Ghent
My Commission Expires:
Stamp/Seal:



RESA GHENT
Commission # HH 002088
Expires July 22, 2024
Bonded thru Budget Notary Services