



RECEIVED

AUG 7 2024

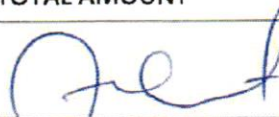
CITY OF FORT PIERCE
COMMUNITY RESPONSE
Code Enforcement &
Animal Control

REDUCTION OF LIEN APPLICATION

A separate application must be submitted for each lien type.

Date:	8/7/24		
Property address:	1140 Avenue D		
Owner(s) of record:	Cephus Cruickshank		
Mailing address:	ATTN: JACQUES CHESTER 1973 SW SAVAGE BLVD #101 FORT ST LUCIE FL 34953		
Property tax ID #:	2409-501-0307-000-1		
Original purchase date:	2-21-06	Original purchase price:	\$270,000 ⁰⁰
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)	REPRESENTATIVE
Telephone #:		E-Mail:	
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) Case# 21-544	\$ 105,100.00	\$ _____
Recording Fees	\$ 30.00	\$ _____
City incurred fees (MAY NOT BE REDUCED)	\$ _____	\$ _____
Administrative Fees	\$ _____	\$ _____
Interest	\$ _____	\$ _____
Penalties	\$ _____	\$ _____
TOTAL AMOUNT	\$ 105,130.00	\$ 1,500⁰⁰


Signature of Owner or Representative

8-7-24
Date

JACQUES CHESTER
Printed Name



THE SUNRISE CITY
FORT PIERCE
 CODE ENFORCEMENT
Florida

RECEIVED

AUG 7 2024

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.

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: 1140 AVENUE D

Parcel ID #: 2409-501-~~000~~-0307-000-1

Property Owner: LEPHVS CRUICKSHANK

Mailing Address: ATTN: JACQUES CHESTER 1973 SW SAVAGE BLVD #101
PORT ST. LUCIE FL 34953

Telephone #: _____ Cell Phone #: 407.765.5730

E-Mail Address: JACQUES CHESTER

Number of Applications: 1


REQUEST FOR REDUCTION OF PENALTY –STATEMENT

I, 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:

TO PAY ALL HARD COST ASSOCIATED WITH THIS VIOLATION

PLEASE INITIAL:

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

Signature: 

Date: 8-7-2024

FOR OFFICE USE ONLY:		RECEIVED DATE: <u>8/7/24</u>
OWNERSHIP INFORMATION:		
<input checked="" type="checkbox"/> Copy of deed provided	<input type="checkbox"/> Proof of proxy	YES / NO <u>OK to schedule</u>
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 checked="" type="checkbox"/> Special Magistrate Review / Hearing date: _____	

Prepared by
Kelly Hoffman, an employee of
First American Title Insurance Company
109 North Second St.
Fort Pierce, Florida 34950
(772)464-7837

Return to: Grantee

File No.: 1083-1098612

WARRANTY DEED

This indenture made on **February 21, 2006** A.D., by

Divine Vision Properties, Inc., a Florida Corporation and Douglass/Marocco, Inc., a Florida Corporation

whose address is: **909 W. Midway Rd., Fort Pierce, FL 34982**
hereinafter called the "grantor", to

Cephus Cruickshak

whose address is: **914 N 10 Street, Fort Pierce, FL 34950**
hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **St. Lucie County, Florida**, to-wit:

Lots 5 and 6, Block 12 of REVISED SUBDIVISION OF LINCOLN PARK, according to the Plat thereof as recorded in Plat Book 4, Page(s) 77, of the Public Records of St. Lucie County, Florida.

Parcel Identification Number: **2409-501-0307-000/1**

The land is not the homestead of the Grantor under the laws and constitution of the State of Florida and neither the Grantor nor any person(s) for whose support the Grantor is responsible reside on or adjacent to the land.

Subject to all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any way appertaining.


To Have and to Hold, the same in fee simple forever.

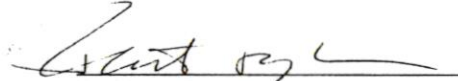
And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31st of 2005.

In Witness Whereof, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

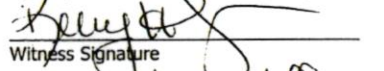
Divine Vision Properties, Inc., a Florida Corporation


Douglass/Marocco, Inc., a Florida Corporation


By: Barracel Tillman, President


By: Robert Douglass, President

Signed, sealed and delivered in our presence:


Witness Signature
Print Name: Kelly Hoffman

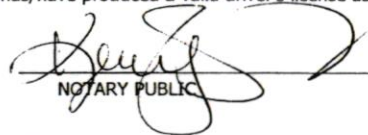

Witness Signature
Print Name: Lyda Babcock

State of **FL**

County of **St. Lucie**

The Foregoing Instrument Was Acknowledged before me on **February 21, 2006**, by **Divine Vision Properties, Inc., a Florida Corporation and Douglass/Marocco, Inc., a Florida Corporation** who is/are personally known to me or who has/have produced a valid driver's license as identification.




NOTARY PUBLIC

Notary Print Name _____
My Commission Expires: _____

NOTES

RECEIPT

DATE

8/7/24

NO.

669713

RECEIVED FROM

Jacques Chester

ADDRESS

Thank you!

FOR

Reduction - lien fee per Code \$500.00

Re: 1140 Avenue B
Case # 21-2879

ACCOUNT		HOW PAID	
AMT. OF ACCOUNT		CASH	
AMT. PAID		CHECK	
BALANCE DUE		MONEY ORDER	250.00

BY Dana Deil

© REDFORM © 81808



City of Fort Pierce
Finance Department

100 N US1
FORT PIERCE, FL
34950
(772) 467-3000
August 7, 2024
10:16 AM
Dana

Receipt: 9E97
Authorization: 00641D

VISA CREDIT
AID A0 00 00 00 03 10 10

Code Enforcement \$500.00
Admin Fees

Total \$500.00
Visa 5766 (Chip) \$500.00
Jacques Chester

