



### REDUCTION OF LIEN APPLICATION

A separate application must be submitted for each lien.

Date:	FEBRUARY 21, 2025				
Property address:	670 HERNANDO STREET - FORT PIERCE, FL 34949				
Owner(s) of record:	670 HERNANDO LLC				
Mailing address:	7901 4 <sup>TH</sup> ST. N, STE 300, ST. PETERSBURG, FL 33702				
Property tax ID #:	2401-503-0022-000-1				
Original purchase date:	12-1-2022	Original purchase price:	\$ 775,000		
Property is used for:	<input type="checkbox"/> Single Family	<input checked="" type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Vacant Lot
Name of person requesting reduction:	JUAN MACIAS		Relationship to owner(s)	PARTNER/OWNER	
Telephone #:	305-216-4327		E-Mail:	JCM110461@GMAIL.COM	
Type of Lien	<input checked="" type="checkbox"/> Building Lien				

TYPE OF FEE	AMOUNT DUE	AMOUNT OFFERED
Daily fine total	\$ _____	\$ _____
Recording Fees	\$ _____	\$ _____
City incurred fees (MAY NOT BE REDUCED)	\$ _____	\$ _____
Administrative Fees	\$ _____	\$ _____
Interest	\$ _____	\$ _____
Penalties	\$ _____	\$ _____
<b>TOTAL AMOUNT</b>	\$ _____	\$ _____

Signature of Owner or Representative

Date

Printed Name

2-21-2025 JUAN MACIAS



### 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. If requesting a hearing, an application fee of \$250.00 per request shall be applied to the Finance Department prior to submitting your request.
7. Requests for reduction of all liens imposed by the City of Fort Pierce are governed by Part 5 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:

670 HERNANDO STREET - FORT PIERCE, FL 34949

Parcel ID #:

2401-503-0022-000-1

Property Owner:

670 HERNANDO LLC

Mailing Address:

7901 4<sup>th</sup> ST. N, STE 300, SAINT PETERSBURG, FL 33702

Telephone #:

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Cell Phone #:

305-216-4327

E-Mail Address:

JCM110461@GMAIL.COM

Number of Applications:

1

REQUEST FOR REDUCTION OF PENALTY – STATEMENT

I, JUAN MACIAS, 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:

GEORGETON CONSTRUCTION HIRED PRECISION PAVING TO COMPLETE A PARKING LOT PROJECT. WE WERE ADVISED THAT IT WOULD NOT REQUIRE A PERMIT (OVERLAY & STRIPING). THE PROJECT WAS COMPLETED AND THEN WE WERE NOTIFIED THAT A SPECIAL MAGISTRATE ISSUED AN ORDER TO OBTAIN PERMIT AND COMPLETE INSPECTIONS. THIS WAS NOT DONE AND WE BEGAN FINES/FEES FOR "PAVING AND STRIPING" WITHOUT A PERMIT, AND WE HAVE COMPLETED THE REQUIREMENTS AND SEEK REDUCTIONS.

PLEASE INITIAL:

- I acknowledge that I have been provided a copy of Part 5.4 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. 5.4. 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: [Handwritten Signature]

Date: 2-21-2025

<b>FOR OFFICE USE ONLY:</b>	<b>RECEIVED DATE:</b>
OWNERSHIP INFORMATION:	
<input type="checkbox"/> Copy of deed provided	<input type="checkbox"/> Proof of proxy    YES / NO
REDUCTION TYPE:	
<input type="checkbox"/> Code lien    # _____	<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: _____