CITY OF PALM COAST

Code Enforcement Board _Case No	
---------------------------------	--

SWORN REQUEST FOR REDUCTION OF FINE/LIEN

Instructions:

Fill in all parts of this form completely. Be specific when writing your statement. Please return this form to the Secretary of the Code Enforcement Board, Code Enforcement Board, 160 Lake Avenue Palm Coast, FL. 32164. The Request Reduction of Fine/Lien will be set on the next available Code Enforcement Board meeting. You will be advised of the hearing date and you may appear at that time. If you are claiming medical or financial hardship, attach supporting documentation. Administrative costs will not be reduced. Liens that have been imposed may only be acted upon by the City Council, but the Code Enforcement Board will provide a recommendation to the City Council.

Property Owner's Name:
Property Address:
Daytime Phone Number
Total Amount of fine/lien to date of compliance:\$
City use Only. Fine/Lien amount verified by:
Is the property now in compliance? yesno (If no explain)
Date property brought into compliance:
Are you claiming a financial hardship? yes no (If yes, state below)
Are you claiming a medical hardship? yesno (If yes, state below)
I,, do hereby submit this Request for Reduction of Fine/Lien and in support thereof, offer the following statement under oath:

-	
·	
Date:	Signed:
Date	Print Name:
	Time runio.
Δ.(CKNOWLEDGMENT
A	CKNOW LEDGMENT
State of	
County of	
County or	
This day of	personally appeared before me, the
statement	, who being duly sworn
acknowledged before me that the i	nformation contained herein is true and correct.
	as identification and did an
oath.	as identification and did an
Oatii.	
	Notary Dublia
	Notary Public
	My Commission expires:
	Seal

Owner of the Property must be present for the Case to be heard. All Requests for Reductions will be heard at the end of the Cases for Respondents that are present.