

TAB 8



City of Palmetto Agenda Item

Meeting Date**12/21/09****Presenter:** Bill Strollo/Roger Titus**Department:** Code Enforcement/Building Department**Title:****Order of Condemnation & Demolition Notice - Ms. Kathryn L. McKinney, 505 11th Street Drive West**

This property has been the subject of code enforcement action since 2005. On March 2, 2006 the Code Enforcement Board imposed a fine of \$250.00 per day commencing February 22, 2006 and continuing until the property is brought into compliance - CEB 06-02.

On June 24, 2009 a notice was written to the property owner advising her that the property was condemned, and she was required to either repair it or demolish the structure. The house was confirmed to be vacant and secured with City locks on June 30, 2009.

A title search was conducted by the City Attorney to identify all individuals having an interest in this property. On November 19, 2009 a Notice of Violation was issued identifying the building as unfit for human habitation, structurally unsafe and a menace to public health. This Notice directed Ms. McKinney to obtain a building permit to repair, secure, demolish or remove the unfit structure on or before November 29, 2009. The Notice was forwarded to Ms. McKinney, certified and regular mail, and it was posted at City Hall and on the condemned building. Copies of this Notice were also forwarded certified and regular mail to American General Home Equity, Douglas C. Zahm, and Richard V. Ellis.

On December 2, 2009 an Order of Condemnation and Demolition Notice was issued again identifying the building as unfit for human habitation, structurally unsafe and a menace to public health. This Order advised Ms. McKinney that the structure meets the criteria for demolition, the structure should be demolished, and demolition is ordered at the expiration of fifteen days. Commencing on December 17, 2009 the City shall vacate, demolish, remove, repair or secure such unfit structure; City Commission may assess the entire cost of remediation to the property owner. The Order was forwarded to Ms. McKinney, certified and regular mail, and it was posted at City Hall and on the condemned building. Copies of this Order were also forwarded certified and regular mail to American General Home Equity, Douglas C. Zahm, and Richard V. Ellis.

The property owner, Ms. Kathryn L. McKinney, has not pursued the remedies ordered by the City. It is recommended City Commission authorize City staff to schedule demolition of this structure through a private vendor and to lien the property owner for all costs incurred. Two quotes have been received for this demolition. Please refer to the expenditure amount below.

Budgeted Amount:	\$200,000.00	Budget Page No(s):	183	Available Amount:	\$200,000.00	Expenditure Amount:	\$4,600.00
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Additional Budgetary Information:

The CRA will fund the demolition of this structure.

Funding Source(s):	69055931 16	Sufficient Funds Available:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Budget Amendment Required:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Source:	
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City Attorney Reviewed:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Advisory Board Recommendation:	<input checked="" type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> N/A	Consistent With:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
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Potential Motion/Direction Requested:

Request City Commission authorize City staff to schedule demolition of this structure through a private vendor and to lien the property owner for all costs incurred.

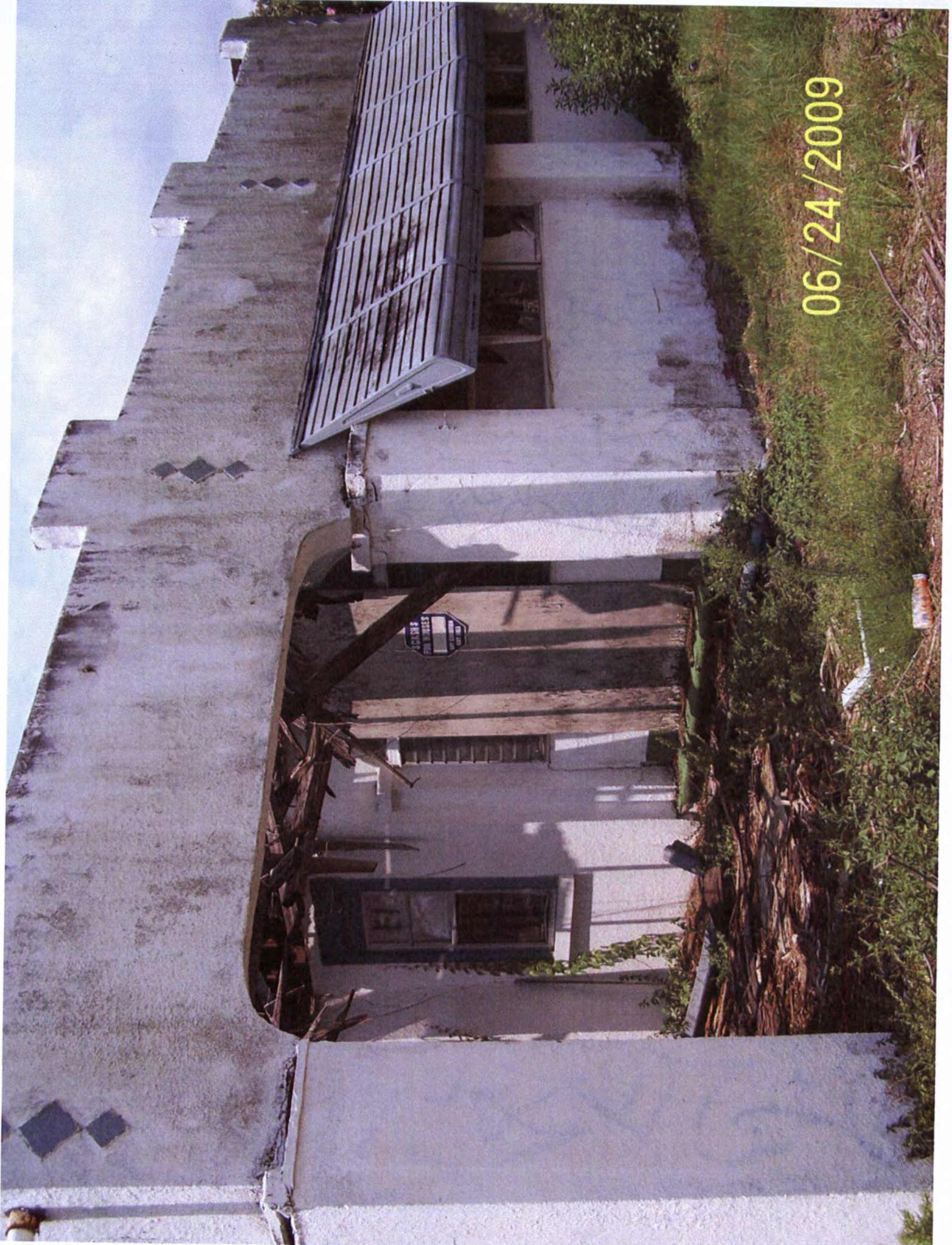
Staff Contact:	Bill Strollo	Roger Titus	
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Attachments:	Notice of Violation, proofs of service, Order of Condemnation, proofs of service, vendor bids for demolition. Pictures to be provided at meeting.
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01/29/2009

SCASH'S
FOR HOUSES
ANY CONDITION
ANY AREA



06/24/2009

06/24/2009



06/25/2009



12/02/2009



**CITY OF PALMETTO
NOTICE OF VIOLATION**

DATE: 11/19/09

TO: MS. KATHRYN L. MCKINNEY
505 11TH STREET DRIVE WEST
PALMETTO, FLORIDA 34221

LOCATION OF VIOLATION: 505 11TH STREET DRIVE WEST, PALMETTO, FL 34221

NOTICE OF VIOLATION:

Pursuant to City of Palmetto Code 1975, § 7-35, and Chapter 162, Florida Statutes, you are notified that a violation of the following Code exists:

Count 1. City of Palmetto Code 1975, § 7-35; Sec. 7-153. Unfit or unsafe dwellings or structures declared nuisance.

DESCRIPTION OF CONDITIONS CONSTITUTING THE VIOLATION:

Count 1. The dwelling or other structure on the property is unfit for human habitation, and may imperil the health, safety, welfare and morals of the occupants thereof or of the surrounding areas.

Count 2. The building continues to be structurally unsafe, inadequately maintained, and in violation of FBC 2007 Sec. 101.3 (Reference Palmetto City Code Sec. 7-153 and 7-155).

Count 3. The building constitutes a menace to public health, a fire hazard, and is unsafe so as to endanger life and property.

ORDER TO CORRECT VIOLATION: You are directed by this notice to make the following corrective actions: Counts 1-3. Obtain a permit to repair, secure, demolish or remove the unfit structure:

ON OR BEFORE: NOVEMBER 29, 2009

Such repair, securing, demolition or removal shall be completed within thirty (30) days from the issuance of a permit for same. Failure to undertake to bring the property into compliance within ten (10) days will be grounds for the City to seek relief as provided for in Article 7 of the Palmetto City Code.

PENALTIES MAY BE IMPOSED:

Failure to correct the deficiencies by the date specified above, may cause the City to vacate, demolish, remove, repair or secure such unfit dwelling or structure, including accessory buildings, either with city forces or by independent contractor submitting the lowest and best bid. The City Council may assess the entire cost of such vacation, demolition, removal or securing, including any unpaid fees and costs arising out of any appeal hearing, against the real property, upon which such costs was incurred. This assessment, including rodent extermination where employed, all administrative costs, postal expense, newspaper advertising and other similar costs, when made, shall constitute a lien upon the property. Failure to comply with this notice may be punishable by a fine of not more than five hundred dollars (\$500.00) or by imprisonment for a term not to exceed sixty (60) days, or by both such fine and imprisonment. Each day that a violation shall continue to exist shall be considered a separate violation and may be prosecuted as such.

Bill Strollo
Director, Code Enforcement
City of Palmetto
516 8th Avenue West
Palmetto, Florida 34221

BS

&
Roger Titus, CBO
Building Official
City of Palmetto, Building Department
600 17th Street West
Palmetto, Florida 34221

R.T.

I hereby CERTIFY that a copy of this Notice was furnished by ☒ Regular Mail, ☒ Certified Mail/Return Receipt Requested, ☐ Hand-Delivery, or by ☐ Delivery at place of residence and/or ☒ Posting and mail, pursuant to F.S. section 162.12 and Section 7-156 of the City of Palmetto Code of Ordinances, to the above-named addressee on this 14th day of November 2009.

By: B. Strollo

Copy to: American General Home Equity
1670 S. Missouri Ave.
Clearwater, FL 33756

And to: Douglas C. Zahm, PA
18830 US Highway 19 North, Suite 330
Clearwater, FL 33764

And to: Richard V. Ellis, Esq.
Hausberg & Ellis, PA
3202 Tamiami Trail
Sarasota, FL 34234

MS. KATHRYN L. MCKINNEY
P.O. BOX 94
PALMETTO, FLORIDA 34220 0094

11/19/09 - Mailed cert + Reg
11/19/09 Posted @ CH & Property

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark Here
PALMETTO FL 34220
NOV 19 2009

Sent To
McKinney
Street, Apt. No.,
or PO Box No. P.O. Box 94
City, State, ZIP+4 PALMETTO FL 34220 0094
PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MS. KATHRYN L. MCKINNEY
P.O. Box 94
PALMETTO, FLORIDA
34220 0094

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Kathryn McKinney ☐ Agent
☐ Addressee

B. Received by (Printed Name)
x Kathryn McKinney x

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7009 0080 0002 3404 3541
(Transfer from ser)

MS. KATHRYN L. MCKINNEY
505 11TH STREET DRIVE WEST
PALMETTO, FLORIDA 34221

11/19/09 Mailed cert + Reg
11/19/09 Postal CH & Property

595C 3404 0000 0080 0002 3404 3565

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark Here
NOV 19 2009
PALMETTO FL 34221
USPS

Sent To
McKinney
Street, Apt. No.,
or PO Box No. 505 11th St. Dr. W
City, State, ZIP+4 Palmetto, FL 34221

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature x Kathryn McKinney <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) x Kathryn McKinney x</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>MS. KATHRYN L. MCKINNEY 505 11th STREET DRIVE WEST PALMETTO, FLORIDA 34221</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from se)</p> <p>7009 0080 0002 3404 3565</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

American General Home Equity
1670 S. Missouri Ave.
Clearwater, FL 33756

11/19/09 - Mailed cert & Reg
11/19/09 - Posted cert & Property

7009 0080 0002 3404 3572

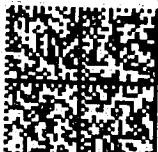
U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com ®	
OFFICIAL USE	
Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark
Here
NOV 19 2009
34221
USPS

Sent To	
American General Home Equity	
Street, Apt. No., or PO Box No. 1670 S. Missouri Ave	
City, State, ZIP+4 Clearwater, FL 33756	

PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES POSTAGE
PITNEY BOWES
02 1P \$005.540
0004420237 NOV 19 2009
MAILED FROM ZIP CODE 34221



2572 404E 0002 0000 6002

PALMETTO

516 8th Ave. W., P.O. Box 1209, Palmetto, FL 34220-1209

60/20/11/20/09
1st Edition 11/20/09
2nd Edition
NAME City/State

American General Home Equity

1670 S. Miss

Clearwater, F

00 11/27/09
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EIXIN

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD

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6021002246



2. Article Number 7009 0080 0002 3404 3572
(Transfer from sel)
PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

American General Home Equity
1670 S. Missouri Avenue
Clearwater, Florida
33756

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

X

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

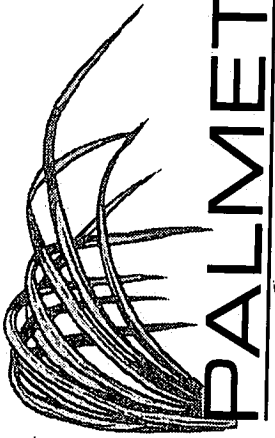
☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

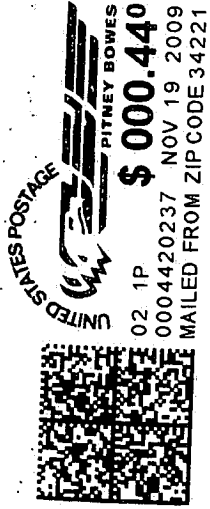
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes



PALMETTO

516 8th Ave. W., P.O. Box 1209, Palmetto, FL 34220-1209

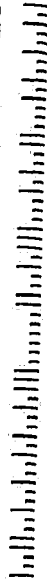


American General Home Equity
1670 S. Missouri Ave
Clearwater, F

NIXIE 337 5E 1 00 11/27/09
RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD

BC: 34220120909 *0974-20328-20-39

33756+1221 3422001209



11/19/09 - Mailed cert + reg
11/19/09 - Potted @ CH + property

3589 404E 3404 3589

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Richard V. Ellis, Esq.
Hausberg & Ellis, PA
3202 Tamiami Trail
Sarasota, FL 34234

11/19/09

Mailed cert & Reg

11/19/09

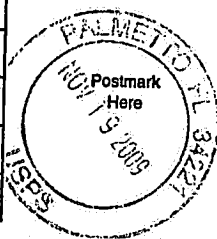
Posted @ CH & Property

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage \$.44
Certified Fee 2.80
Return Receipt Fee
(Endorsement Required) 2.30
Restricted Delivery Fee
(Endorsement Required)
Total Postage & Fees \$5.54



Sent To Richard Ellis
Street, Apt. No.,
or PO Box No. 3202 Tamiami Trail
City, State, ZIP+4[®] Sarasota FL 34234
PS Form 3800, August 2006 See Reverse for Instructions

7009 0080 0002 3404 3596

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

RICHARD V. ELLIS, Esq.
HAUSBERG & ELLIS, PA
3202 TAMIAAMI TRAIL
SARASOTA, FLORIDA
34234

COMPLETE THIS SECTION ON DELIVERY

A. Signature x D Hawkins ☒ Agent
☐ Addressee
B. Received by (Printed Name) x D Hawkins C. Date of Delivery 11/20/09
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7009 0080 0002 3404 3596
(Transfer from sender)

**CITY OF PALMETTO
ORDER OF CONDEMNATION
AND DEMOLITION NOTICE**

DATE: 12/02/2009

TO: MS. KATHRYN L. MCKINNEY
505 11TH STREET DRIVE WEST
PALMETTO, FLORIDA 34221

LOCATION OF DEMOLITION: 505 11TH STREET DRIVE WEST, PALMETTO, FL 34221

NOTICE OF CONDEMNATION:

Pursuant to Palmetto Code of Ordinances 1975, § 7-35, and Chapter 162, Florida Statutes, you were notified on June 24, 2009, and again on November 5, 2009 that a violation of the following Code exists:

Counts 1-3. Palmetto Code of Ordinances 1975, § 7-35; Sec. 7-153. Unfit or unsafe dwellings or structures declared nuisance.

Neither you nor any interested parties have obtained a building or demolition permit within the period specified in the Notice of Violation, nor have you in good faith and in due time begun work to comply with the order to repair, demolish, or otherwise dispose of the unfit structure, nor have you advised that you would simply be unable to complete initiated work by the date ordered, and you have not provided the Building Official a written request to the City Council stating the reasons you have been unable to fully comply.

DESCRIPTION OF CONDITIONS CONSTITUTING THE CRITERIA FOR DEMOLITION:

- Count 1. The dwelling or other structure on the property is unfit for human habitation, and may imperil the health, safety, welfare and morals of the occupants thereof or of the surrounding areas.
- Count 2. The building continues to be structurally unsafe, inadequately maintained, and in violation of FBC 2007 Sec. 101.3 (Reference Palmetto Code of Ordinances Sec. 7-153 and 7-155).
- Count 3. The building constitutes a menace to public health, a fire hazard, and is unsafe so as to endanger life and property.

ORDER OF DEMOLITION: You are hereby notified that: 1. The structure meets the criteria for demolition; 2. The structure should be demolished; and 3. Demolition is hereby ordered at the expiration of fifteen (15) days from the date hereof, or

COMMENCING ON: DECEMBER 17, 2009

This action is consistent with the authority of the City of Palmetto to adopt and enforce municipal ordinances related to code enforcement and the elimination of dangerous and unsafe buildings and it does not constitute the taking of private property by eminent domain for the purpose of preventing or eliminating nuisance, slum or blight conditions in a manner inconsistent with Chapter 73, Florida Statutes.

PENALTIES MAY ALSO BE IMPOSED:

The City shall vacate, demolish, remove, repair or secure such unfit dwelling or structure, including accessory buildings, either with city forces or by independent contractor submitting the lowest and best bid pursuant to Sec. 7-157 of the Code of Ordinances. The City Council may assess the entire cost of such vacation, demolition, removal or securing, including any unpaid fees and costs arising out of any appeal hearing, against the real property, upon which such costs was incurred. This assessment, including rodent extermination where employed, all administrative costs, postal expense, newspaper advertising and other similar costs, when made, shall constitute a lien upon the property. Failure to comply with the Notice of Violation heretofore given may also be punishable by a fine of not more than five hundred dollars (\$500.00) or by imprisonment for a term not to exceed sixty (60) days, or by both such fine and imprisonment. Each day that a violation shall continue to exist shall be considered a separate violation and may be prosecuted as such.

Roger Titus, CBO
Building Official
City of Palmetto, Building Department
600 17th Street West
Palmetto, Florida 34221

R.T.

&
Bill Strollo
Director, Code Enforcement
City of Palmetto
516 8th Avenue West
Palmetto, Florida 34221

BS

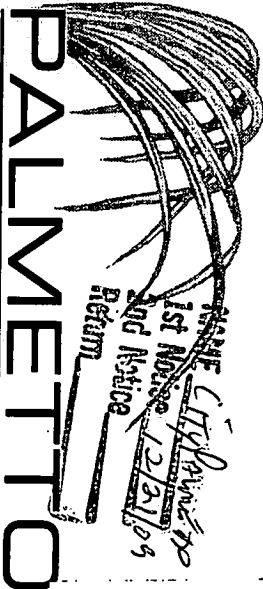
I hereby CERTIFY that a copy of this Notice was furnished by ☒ Regular Mail, ☒ Certified Mail/Return Receipt Requested, ☐ Hand-Delivery, or by ☐ Delivery at place of residence and/or ☒ Posting and mail, pursuant to F.S. section 162.12 and Section 7-156 of the Palmetto Code of Ordinances of Ordinances, to the above-named addressee on this 2nd day of December 2009.

By: B. Strollo

Copy to: American General Home Equity
1670 S. Missouri Ave.
Clearwater, FL 33756

And to: Douglas C. Zahm, PA
18830 US Highway 19 North, Suite 330
Clearwater, FL 33764

And to: Richard V. Ellis, Esq.
Hausberg & Ellis, PA
3202 Tamiami Trail
Sarasota, FL 34234



516 8th Ave. W., P.O. Box 1209, Palmetto, FL 34220-1209



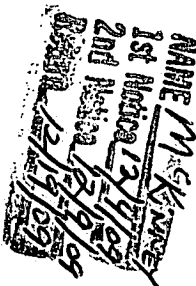
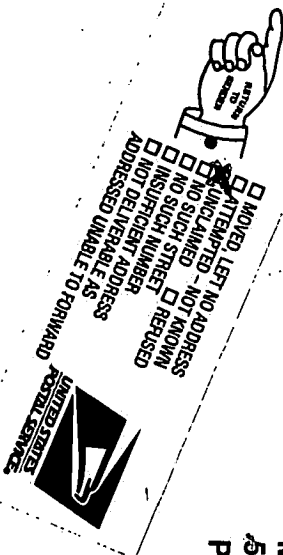
7009 0080 0002 3404 4005



UNITED STATES POSTAGE
PITNEY BOWES
\$ 005.54
02 1P
0004420237 DEC 01 2009
MAILED FROM ZIP CODE 34221

MS. KATHRYN L. MCKINNEY
505 11TH STREET-DRIVE WEST
PALMETTO, FLORIDA

PO Box 94



SENDER: COMPLETE THIS SECTION

- ☐ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☐ Print your name and address on the reverse so that we can return the card to you.
- ☐ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MS. KATHRYN L. MCKINNEY
505 11TH STREET-DRIVE WEST
PALMETTO, FLORIDA
34221

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) ☒ C. Date of Delivery ☒
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7009 0080 0002 3404 4005

(Transfer from se)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS ONLY ADDRESS LINE

Notice of Demo

Dec. 2, 09 - Mailed cert + reg.
- posted @ CH & Property

MS. KATHRYN L. MCKINNEY
505 11TH STREET DRIVE WEST
PALMETTO, FLORIDA 34221

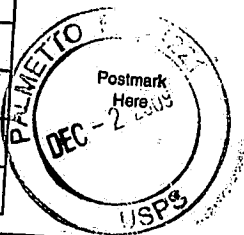
U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To

McKinney
Street, Apt. No.,
or PO Box No. 505 11th St. Dr. W
City, State, ZIP+4 Palmetto, FL 34221

PS Form 3800, August 2006

See Reverse for Instructions



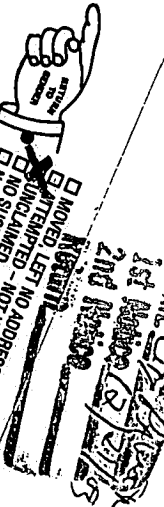
516 8th Ave. W., P.O. Box 1209, Palmetto, FL 34220-1209



7009 0080 0002 3404 3992



UNITED STATES POSTAGE
PITNEY BOWES
02 1P
\$ 005.54
0004420237 DEC 01 2009
MAILED FROM ZIP CODE 34221



MS. KATHRYN L. MCKINNEY
P.O. Box 94
PALMETTO, FLORIDA 34220

Order of
Devolution



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Kathryn L. McKinney
P.O. Box 94
Palmetto, Florida
34220

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) ☒ C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from s) 7009 0080 0002 3404 3992

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS FOR ADDITIONAL INFO

Notice of Denial

Dec. 2, 09

Mailed Cert + Reg
Postel@CH & prospect

MS. KATHRYN L. MCKINNEY
P.O. Box 94
PALMETTO, FLORIDA 34221

7009 0080 0002 3404 3992

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage	\$ 1.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark
Here
DEC - 2 2009

PALMETTO FL 34221

Sent To
McKinney

Street, Apt. No.,
or PO Box No. P.O. Box 94

City, State, ZIP+4 Palmetto FL 34220

PS Form 3800, August 2006 See Reverse for Instructions

PALMETTO

516 8th Ave. W., P.O. Box 1209, Palmetto, FL 34220-1209

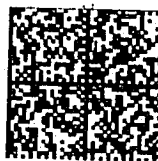
CITY HALL

DEC 11 2009

RECEIVED



7009 0080 0002 3404 3985



UNITED STATES POSTAGE
PITNEY BOWES
\$ 005.540
02 1P
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MAILED FROM ZIP CODE 34221

American General Home Equity
1670 S. Missouri Ave.
Clearwater, FL 33766

NIXIE

337 SE 1

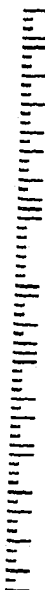
00 12/08/09

RETURN TO SENDER
UNDELIVERABLE TO FORWARD

BC: 34220120909

*3001-11060-02-36

34220120909



1025201-M-1540

Domestic Return Receipt

PS Form 3811, February 2004

596E 404E 2000 0800 6002

2. Article Number
(Transfer from se)

4. Restricted Delivery? (Extra Fee) ☐ Yes

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

C. Date of Delivery ☒

B. Received by (Printed Name) ☒
A. Signature ☒ Agent ☐ Addressee

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to

American General Home Equity
1670 S. Missouri Avenue
CLEARWATER, FLORIDA
33766

Notice of Demos - Mailed cert + Regular
Dec. 2, 09 - Posted @ CH & Property

American General Home Equity
1670 S. Missouri Ave.
Clearwater, FL 33756

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To American General
Street, Apt. No.,
or PO Box No. 1670 S. Missouri Ave
City, State, ZIP+4 Clearwater FL 33756

PS Form 3800, August 2006

See Reverse for Instructions

7009 0080 0002 3404 3985

Notice of Demand

Dec. 2, 09 Mailed cert + Regular
Dec. 2, 09 Posted @ CH & Property

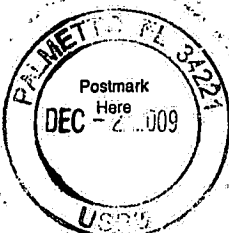
Douglas C. Zahm, PA
18830 US Highway 19 North, Suite 330
Clearwater, FL 33764

U.S. Postal ServiceTM
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OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To Zahm
Street, Apt. No.,
or PO Box No. 18830 US Hwy 19 N Suite 330
City, State, ZIP+4 Clearwater FL 33764

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DOUGLAS C. ZAHM, P.A.
18830 US Highway 19 North
Suite 330
CLEARWATER, FLORIDA
33764

2. Article Number

(Transfer from serv)

7009 0080 0002 3404 3978

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jen Buck

☐ Agent

☐ Addressee

B. Received by (Printed Name)

X Jen Buck

C. Date of Delivery

X

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Notice of Demo

Dec. 2, 09 Mailed cert + Regular
Dec. 2, 09 Posted @ CH & Property

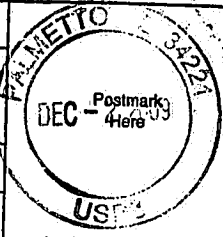
Richard V. Ellis, Esq.
Hausberg & Ellis, PA
3202 Tamiami Trail
Sarasota, FL 34234

U.S. Postal ServiceTM
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Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To Ellis
Street, Apt. No.,
or PO Box No. 3202 Tamiami Trail
City, State, ZIP+4[®] Sarasota, FL 34234
PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

RICHARD V. ELLIS, ESQ.
HAUSBERG & ELLIS, P.A.
3202 TAMAMIAMI TRAIL
SARASOTA, FLORIDA
34234

2. Article Number

(Transfer from serv) 7009 0080 0002 3404 3961

COMPLETE THIS SECTION ON DELIVERY

A. Signature D. Hawkins ☒ Agent ☐ Addressee
B. Received by (Printed Name) D. Hawkins C. Date of Delivery 12/2/09
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes



516 8th Avenue West
P.O. Box 1209
Palmetto, Florida 34220-1209
Phone (941) 723-4570
Fax: (941) 723-4576
Suncom: 516-0829
E-mail: chgeneral@palmettofl.org
Web: www.palmettofl.org

December 15, 2009

Ms. Kathryn L. McKinney
P.O. Box 94
Palmetto, Florida 34220 0094

Dear Ms. McKinney:

Please be advised the City of Palmetto Commissioners will hear testimony regarding the Notice of Violation and the Order of Condemnation and Demolition Notice issued regarding your property at 505 11th Street Drive West, Palmetto, Florida. This hearing is scheduled for Monday, January 4, 2010 at the City of Palmetto Commission Chambers, 516 8th Avenue West, Palmetto, Florida at 7:00pm.

This is notice of that hearing, and you are encouraged to attend to present any pertinent testimony regarding this matter to the City Commissioners.

If you have any questions regarding this hearing, please feel free to contact me at Palmetto City Hall either in person or by telephone at (941) 723-4570, extension 105.

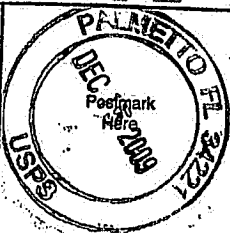
Thank you for your cooperation.

Sincerely,

Bill Strollo
Code Enforcement Director

7009 0080 0002 3406 4036

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To	K. McKinney
Street, Apt. No., or PO Box No.	P.O. Box 24
City, State, ZIP+4	Palmetto, FL 34220 0044

PS Form 3800, August 2006 See Reverse for Instructions

December 15, 2009
Not Sent
CERT & Reg

Posted on property
@ CIT - 12/16/09

Dear Ms. McKinney:

Please be advised the City of Palmetto Commissioners will hear testimony regarding the Notice of Violation and the Order of Condemnation and Demolition Notice issued regarding your property at 505 11th Street Drive West, Palmetto, Florida. This hearing is scheduled for Monday, January 4, 2010 at the City of Palmetto Commission Chambers, 516 8th Avenue West, Palmetto, Florida at 7:00pm.

This is notice of that hearing, and you are encouraged to attend to present any pertinent testimony regarding this matter to the City Commissioners.

If you have any questions regarding this hearing, please feel free to contact me at Palmetto City Hall either in person or by telephone at (941) 723-4570, extension 105.

Thank you for your cooperation.

Sincerely,

Bill Strollo
Code Enforcement Director

American General Home Equity, Inc.
601 N.W. Second Street
Evansville, Indiana 47708

Dec. 15, 2009

NOH - JAN 4, 2010
Comm. Met.

cert + Reg mail

Ported on property &
@ Ctl 12/16/09

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Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark
Hans
DEC 15 2009

Sent To: Amer. Gen. Home Equity
Street, Apt. No.,
or PO Box No. 601 N.W. 2nd St
City, State, ZIP+4 Evansville, IN 47708

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:
AMERICAN GENERAL HOME EQUITY
601 N.W. SECOND STREET
EVANSVILLE, IN 47708

Article Number
Transfer from se 7009 0080 0002 3404 4067

Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ X Rodney J. Schmitt ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Rod Schmitt

C. Date of Delivery
12-21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

102595-02-M-1540

Douglas C. Zahm, PA
18830 US Highway 19 North, Suite 330
Clearwater, FL 33764

Dec. 15, 2009

NOIT - Jan 4, 2010

Comm.

mailed cert + Reg.

Ported on property #
@ CH 12/16/09

7009 0080 0002 3404 4050

U.S. Postal Service™
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OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark Here
DEC 15 2009
FL 34721

Sent To
Douglas ZAHM
Street, Apt. No.,
or PO Box No. 18830 US Hwy 19 N, Suite 330
City, State, ZIP+4 Clearwater, FL 33764

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Douglas C. ZAHM, PA
18830 US Highway 19 North
Suite 330
CLEARWATER, FL
33764

2. Article Number
(Transfer from ser) 7009 0080 0002 3404 4050

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name)
x

C. Date of Delivery
x 12-16

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Richard V. Ellis, Esq.
Hausberg & Ellis, PA
3202 Tamiami Trail
Sarasota, FL 34234

Dec 15, 2009
NOT Jan 4, 2010
Comm. Meet
mailed cert + Reg

Posted on property
E @ est on 12/16/0

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark Here
PALMETTO FL 34221
DEC 15 2009

Sent To: Richard V. Ellis
Street, Apt. No., or PO Box No.: 3202 Tamiami Trail
City, State, ZIP+4: Sarasota, FL 34234

PS Form 3800, August 2006. See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY										
<ul style="list-style-type: none">Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.Print your name and address on the reverse so that we can return the card to you.Attach this card to the back of the mailpiece or on the front if space permits.	<table><tr><td>A. Signature X</td><td><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</td></tr><tr><td>B. Received by (Printed Name) X</td><td>C. Date of Delivery 12/16/09</td></tr><tr><td colspan="2">D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</td></tr><tr><td colspan="2">3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</td></tr><tr><td colspan="2">4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</td></tr></table>	A. Signature X	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	B. Received by (Printed Name) X	C. Date of Delivery 12/16/09	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
A. Signature X	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee										
B. Received by (Printed Name) X	C. Date of Delivery 12/16/09										
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No											
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.											
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes											
1. Article Addressed to: RICHARD V. ELLIS, ESQ. HAUSBERG & ELLIS, PA 3202 TAMIAMIA TRAIL SARASOTA, FLORIDA 34234											
Article Number (Transfer from s): 7009 0080 0002 3404 4043											

S Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

American General Home Equity, Inc.
601 N.W. Second Street
Evansville, Indiana 47708

Dec. 15, 2009
Nov & order for demo
mailed cert & Regular

Original Notice & Order
returned as undeliverable

7009 0080 0002 3404 4012

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark: PALMETO, DEC 15 Here, 2009

Sent To: American General Home Equity
Street, Apt. No., or PO Box No.: 601 N.W. Second Street
City, State, ZIP+4: Evansville, IN 47708

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <u>Rodney L. Schmit</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: AMERICAN GENERAL HOME EQUITY 601 N.W. SECOND STREET EVANSVILLE, IN 47708</p>		<p>B. Received by (Printed Name) X <u>ROD SCHMIT</u></p>	<p>C. Date of Delivery <u>12-21</u></p>
		<p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from serial number) 7009 0080 0002 3404 4012</p>			

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



3404 17th St. E.
Palmetto, FL 34221
Phone: (941) 729-8150
Fax: (941) 729-7345
CGC058110

PROPOSAL

DECEMBER 14, 2009

TO: CITY OF PALMETTO
ATTN: BEVERLY MADDOX
PHONE: (941) 723-4988
FAX: (941) 723-4704
RE: 505 11TH ST. DR. W.
312 14TH ST. W.

SCOPE OF WORK: COMPLETE DEMOLITION

- Our proposal is based per site visit, no plans or specs available. Our scope of work is listed below and is limited to these items.
- No tree removal is included.
- Protection of surfaces is not included.
- Forristall Enterprises, Inc. will act with due diligence to protect the existing landscaping, but cannot guarantee that this will not be damaged during demolition. In the event that the landscaping is damaged in the process of demolition, Forristall Enterprises, Inc. will be held harmless.

DEMOLITION NOTES:

- Demolish and remove from site (1) single-story, residential structure at 505 11th St. Dr. W., including foundations, interior and exterior walls, roof and ceiling.

BASE BID: \$3,600.00

- Demolish and remove from site (1) single-story, residential structure at 312 14th St. W., including slab, foundations, interior and exterior walls, roof and ceiling.

BASE BID: \$4,000.00

The following are options/additive alternatives that we can provide:

- ✓ ➤ Demolition Permit Processing \$ cost plus \$200
- Well - Locate and Water Test (each) \$ 475.00
- Well Plugging \$ cost plus 15%
- ✓ ➤ Septic Tank - Pump, Crush & Fill (each) \$ 750.00
- ✓ ➤ Water Disconnect (each) \$ 400.00
- ✓ ➤ Sewer Disconnect (each) \$ 400.00

STANDARD SPECIFICATIONS/EXCLUSIONS:

- Permit has not been included but can be added from the list of additive alternates.
- The removal of buried or unforeseen objects is not included.
- Silt fence is not included but can be added upon request. Cost for this work is \$1.25 per lineal foot.
- No asbestos removal or abatement has been included.
- An asbestos survey must be completed for all commercial demolition projects, and a copy must be provided to Forristall, prior to demolition.
- A "notice of demolition" must be filed with the EPA, 10 working days prior to commencement of any work for all commercial projects.
- No removal of rubber tires, fuel tanks or any material considered hazardous or restricted.
- Underground utility, including drainage and irrigation are not included.
- No underground tank removal of any type unless specifically stated above.
- No shoring will be provided or installed by this subcontractor.

FORRISTALL ENTERPRISES, INC.
PAGE 2

- All salvageable items should be removed prior to commencement of demolition, any remaining items to become property of Forristall Enterprises, Inc.
- All mechanical, electrical and plumbing systems must be cut, capped or drained by others prior to demolition unless specifically included above.
- Bid is based on normal working hours, 8:00 a.m. to 4:00 p.m., Monday – Friday. No nights, holidays or weekends are included.
- One mobilization is included. Add \$300 for each additional.
- Items not listed above are not included.
- All invoices are due within 10 days after invoice date, and considered late thirty days after invoice date. We will begin billing at an additional 1.5% per month thereafter. In the event that we cannot collect within a reasonable amount of time we are entitled to any and all court costs and attorneys fees required to collect this unpaid amount.
- No retainage can be held for more than thirty days after completion of our scope of work.
- This estimate is valid for thirty days from the date above.

If you have any questions, or require additional information, please call Michael Forristall at (941) 729-8150.

Very truly yours,

FORRISTALL ENTERPRISES, INC.

CHEAVES MASONRY & CONSTRUCTION, INC.
1450 29TH Street East
Palmetto, Fl 34221
(941) 722-5905-Office * (941) 722-8150-Fax
License number: CRC1326621

December 4, 2009

GENERAL CONTRACT FOR SERVICES

This Contract for Services is mad effective as of December 4, 2009, by and between City of Palmetto, and Cheaves Masonry & Construction, Inc. of 1450 29th St E., Palmetto, Florida 34221.

DESCRIPTION OF SERVICES. "Demolish existing house located at 505 11th St Drive W. Palmetto. Provide building permit for house, sewer cap and meter cap. Remove and haul away debris, grade lot, no fill dirt included.

PAYMENT FOR SERVICES. \$7,500.00

Sincerely,



Richard E. Cheaves, Sr.
Contractor

Date 12/4/09