SEMINOLE COUNTY CODE ENFORCEMENT BOARD CASE NO. 17-110- (£1)

REQUEST FOR REDUCTION/WAIVER OF LIEN

BY COMPLETING THIS FORM, YOU ARE MAKING STATEMENTS UNDER OATH THE PROPERTY MUST BE IN COMPLIANCE FOR CONSIDERATION

INSTRUCTIONS: Please fill out both pages of this form completely. Be specific when writing your statement. If you are claiming medical or financial hardship, attach supporting documentation (*i.e.*, a doctor's statement or proof of income). Please return this form to the Clerk to the Code Enforcement Board, along with a check made payable to the "BCC", for the **non-refundable \$500.00 application fee.** The *Request for Reduction/Waiver of Lien* will then be sent for review to verify that all criteria for consideration are met. Once it has been verified that your case meets all of the criteria, it will be scheduled for presentation to the Board of County Commissioners at their next regularly-scheduled hearing, or as soon thereafter as possible (this process can take 6-8 weeks). You will receive a letter advising of the date and time of the meeting; and you should plan to attend. You will be notified in writing of the Board's decision within 10 days after the hearing. If you have any questions, please call the Clerk at (407) 665-7403.

Property Owner's Name:	18 Plymouth Ave Altamonte Springs, FL 32701-5608			
Property Address:1				
Daytime Phone Number:	4074-702-9000		_	
Is the property now in o	compliance?	YES NO		
(If No, explain in detail):				
Are you requesting a re	eduction to the lien?	YESNO		
If yes, the amount you would like it reduced to:		\$0.00 Zero		
Are you claiming a fina If yes, please attach sup	•	YES NO		
Are you claiming a med If yes, please attach sup	•	YES NO		
		orm, list the name of the person who is legally authorible to the property owner:	rized	
Name: Phyllis Hall,	POA			
Polationship: Dat	uahter			

Phyllis Hall	, do hereby submit this form to request a
	of the lien imposed, and in support offer the following ecessary): See Additional attachment and documents.
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nte: Feb 18, 2025 sig	ned: Dec Hall
	nt Name: Dhylis Hall
STATE OF <u>GA</u> COUNTY OF <u>ROCKdule</u>	
PERSONALLY appeared before me, the a acknowledgments, Phyllis Ho	undersigned authority duly authorized to administer oaths and take
acknowledged before me that the informa	ation contained herein is true and correct. He/she is not personally
known to me and has produced	FLA DL
identification and did take an oath.	Anthriting A Committee of the Committee
Date: 02-18-2025	Notary Public No
	My commission expires: 02 27 202 12 500 5000
RETURN COMPL	LETED, SIGNED AND NOTARIZED FORM TO:

Date: February 14, 2025

Property: 118 Plymouth Ave Altamonte Springs, FL 32701

To: Clerk, Seminole County Code Enforcement, 1101 East First St Sanford, FL 32771-1468

I, Phyllis Hall on behalf of my mother Earlene Landingham, am requesting that the lien be reduced to zero. Since 2014 my parents experienced memory loss, which caused them to wander away from home during the day and night and cause harm to themselves and others while living alone. In 2015 they officially had to live with me at my home located at 852 Darwin Dr Altamonte Springs FL. They were officially diagnosed with dementia/ Alzheimer's in 2015. I am their only child and at that time I became their permanent care giver until the death of my father in 2019.

We moved Georgia in 2022, and when I sold my home in August of 2024, that is when I first found out about the lien on 118 Plymouth. My mother continues to live with me but is on a fixed income. She receives Social Security in the amount of \$1700 which must cover the mortgage, homeowners' insurance, property tax and out of pocket medical treatment and supplies. In 2024 she broke her fell getting off the toilet and broke her femur which has caused extra fees for caregivers. She is unable to pay any additional fees or bills due to her fixed income. There is no possible way that my mother will be able to pay these fees at the age of 89 and neither can I. Please see the attached documentation as proof.

Sincerely,

Phyllis Hall, in care of Earlene Landingham

2-18-25

Current address: 2314 Benji Blvd SE Conyers, GA 30013 407-702-900

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