



COUNCIL ITEM 9A
DATE 9/24/12

ROBERT M. LEWIS, ESQ.

September 18, 2012

Sent FedEx (Tracking No.: 8013 7114 7191)

City Clerk of Port St. Lucie,
Ms. Karen A. Phillips, CMC
121 S.W Port St. Lucie, Blvd.
Port St. Lucie, Florida 34984

Re: Notice of Appeal

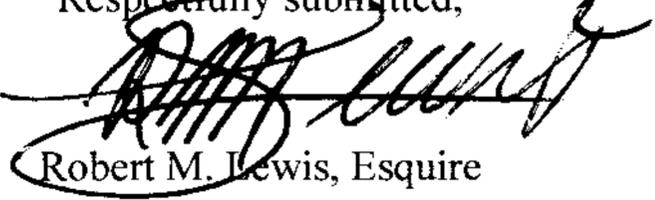
Dear Ms. Phillips:

As you are aware, the undersigned represents Mr. Clifford Russ, with regard to an Administrative Complaint associated with his contractor's license (# CGC1505788); and the respective disciplinary action imposed by the Contractors Examining Board, to which an Appeal Hearing is currently set for Monday, September 24, 2012 at 7:00p.m.

As such and pursuant to your letter dated August 31, 2012, please find enclosed "back-up material" that I wish to have put into the "packet" for the above referenced hearing.

Thank you for your assistance with regard to the above.

Respectfully submitted,



Robert M. Lewis, Esquire

RML/kb

Enclosures:

1. WPB Police Report – Case No.: 2012-0012871
2. WPB Police Event Reports – Event ID: 12-00088357 & 12-00111460 & 12-00088525
3. Affidavits: Michael Hoskin & Clifford Russ
4. Subpoena For Trial Duces Tecum – Lyle Nichols, Plans Examiner, City Port St. Lucie
5. Port St. Lucie Police Crash Report: #310017928
6. Photographs (x3) of Project Site

cc: Client

LAW OFFICE OF
ROBERT M. LEWIS, LLC

P.O. BOX 1831, JUPITER, FL 33468 • OFFICE: 561-355-5671 • FAX: 561-355-5672

• FLORIDA SUPREME COURT CERTIFIED FAMILY LAW MEDIATOR • ADMITTED U.S. SOUTHERN DISTRICT



COUNCIL ITEM 9A
DATE 9/24/12

ROBERT M. LEWIS, ESQ.

August 21, 2012

Sent FedEx (Tracking No.: 8996 5940 0198)
&
Email: karenp@cityofpsl.com

City Clerk of Port St. Lucie,
Ms. Karen Phillips
121 S.W Port St. Lucie, Blvd.
Port St. Lucie, Florida 34984

Re: Notice of Appeal

Dear Ms. Phillips:

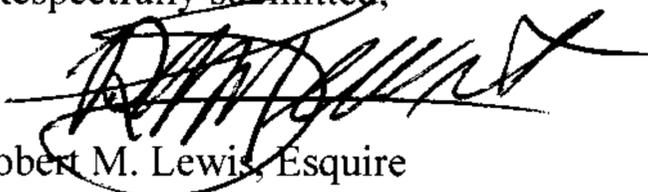
Please be advised that the undersigned represents Mr. Clifford Russ, with regard to an Administrative Complaint associated with his contractor's license (# CGC1505788); and the respective disciplinary action imposed by the Contractors Examining Board, at the conclusion of a local hearing, which presumably took place on August 9, 2012.

Due to unforeseen circumstances beyond my client's control, he never received notice of the above hearing and as such, was not in attendance to present his meritorious defenses at the above August 9th "local hearing".

Based on the above and the severity of the Board's order: "suspension of permitting privileges for 365 days" and assessment of "\$205 in Administrative Costs", you are hereby placed on notice that my client, Mr. Clifford Russ, wishes to appeal the decision of the Contractors Examining Board.

Thank you.

Respectfully submitted,


Robert M. Lewis, Esquire

AUG 22 '12 PM 3:55

RML/

cc: Client

chewitz@cityofpsl.com

LAW OFFICE OF
ROBERT M. LEWIS, LLC

P.O. BOX 1831, JUPITER, FL 33468 • OFFICE: 561-355-5671 • FAX: 561-355-5672

Mr. Oldakowski stated, "Based on the Findings of Fact and Conclusions of Law, I **move** to order the following disciplinary action: Level 3, Suspension of Permitting Privileges for 365 days, and pay an administrative fee of \$205." Mr. Parish **seconded** the motion, which **passed unanimously** by voice vote. Mr. Oldakowski said, "I **move** to recommend to the CILB that a Letter of Reprimand be placed in the contractor's file." Vice Chair Zientz **seconded** the motion, which **passed unanimously** by voice vote.

City of Port St. Lucie, Kevin Pierce versus Clifford Russ, Skyhigh Siding and Roofing

Violation of FBC 105.4 and City Code Section 150.105.4, Conditions of Permits

Mr. Reisinger said, "This complaint was filed by City of Port St. Lucie Licensing Investigator Kevin Pierce against the license of Clifford Russ, a certified general contractor doing business as Skyhigh Siding and Roofing. A Notice of Non-Compliance was sent regular mail to the address of record on November 8, 2011. The formal complaint was sent to the violator on May 29, 2012. The contractor was charged with violating FBC 105.1 and City Code Section 150.105.1, Required Permits. The contractor has not responded in writing to the complaint." Mr. Pierce stated, "On December 10, 2010, Mark Brockway, a licensing investigator, discovered structural repairs being performed at 1797 SW Monterey Lane due to a vehicle strike. A permit was submitted that same day by Clifford Russ, Skyhigh Siding and Roofing, to repair the damage. Per the plans examiner, the permit could not be approved as submitted, and they required additional information from the engineer. There were several conversations throughout the month between myself, the homeowner, the engineer, and our Plan Review Department. As of today, the permit was never approved, it expired, and has voided since it laid in Plan Review for more than 180 days." (**Clerk's Note:** Mr. Russ was not present).

Chair Flaxman asked, "Have you had any contact?" Mr. Pierce replied, "I've had multiple conversations with him as has our Plan Review Department and the property owner. We've talked to his engineer, to him, and he has had notices from us over and over again with many conversations stating to him that he needed to take care of this, or we would proceed with a formal complaint. He has just never followed through." Mr. Cseak asked, "Is there a breakdown somewhere between the engineer, the homeowner, and this, or is it just. . . ? Have you talked with all of these people?" Mr. Pierce responded in the affirmative. Mr. Cseak asked, "Did the engineers provide him with the information needed to get the permit done?" Mr. Pierce replied, "I don't know that. I just know that we have spoken with the engineer, and the engineer was made well aware by our Plan Review Department what needed to be done. The contractor was made well aware of what needed to be done, and it hasn't been done." Mr. Oldakowski asked, "What kind of permit was submitted?" Mr. Pierce replied, "This was for structural repairs to the outside of the building. I believe it involved the exterior sheeting, the top plate, and the exterior wall. There was a vehicle strike, so they needed to repair the exterior wall of the house. It also included some electrical issues, because there were a couple of outlets affected." Chair Flaxman asked, "Is the repair done?" Mr. Pierce replied in the affirmative. Mr. Oldakowski asked, "What is this company licensed for?" Mr. Pierce replied, "They are a state certified contractor." Mr. Oldakowski asked, "As a general contractor?" Mr. Pierce replied, "We let him apply for the permit, so he would have been authorized to do the work under state statute." Ms. Noto commented, "He is a state certified general contractor."

Ms. Brown asked, "How bad is this house damaged?" Mr. Pierce replied, "The damage itself was pretty standard for a vehicle strike. It wasn't the entire side of the house. The homeowner was concerned that a follow through be taken care of, because there was electrical, and he did proceed." Mr. Cseak asked, "Was an electrical contractor hired for this?" Mr. Pierce replied, "We don't know that for sure, because he didn't fulfill his permit requirements to get the permit issued, and he proceeded with the work." Mr. Reisinger pointed out, "They have to submit an engineer plan on how to make the repairs, and this is what he had done, but he never followed up, because there were some issues that surfaced on the plans that were submitted that Plan Review wasn't satisfied with on how it was being done, or wanted more answers. It's his obligation to take that from Plan Review, bring it back to his engineers, get the corrections made, and bring it back before the permit can be issued." Mr. Cseak remarked, "You don't even know if the job has been done right." Mr. Reisinger said, "Correct. Obviously, it didn't meet the Building Code, so it was turned away and he was told to redo, and he failed to follow up and bring it back, or to actually pick it up to bring it back to his engineer."

Mr. Cseak said, "Based on the testimony heard today and the evidence produced by the parties in this case, I **move** to find that the following facts did occur and the Conclusions of Law are as follows: On May 29, 2012, a complaint was filed by the City of Port St. Lucie against the license of Clifford Russ pursuant to City Code Section 150.520.2. Notice was achieved by certified mail. The contractor has been charged with and did violate FBC 105.1 and City Code Section 150.105.1." Ms. Brown **seconded** the motion, which **passed unanimously** by voice vote. Chair Flaxman noted, "There are no complaints on file." Mr. Cseak stated, "This is an old file." Mr. Pierce noted, "The first contact with him was December 1, 2010. Mark Brockway visited on December 10, and someone was still working on the house. I had multiple conversations with the homeowner where she was concerned, because she owned the house but her elderly mother lives there. She was concerned about the electric." Ms. Noto noted, "This is the only permit he applied for in the City of Port St. Lucie." Ms. Brown commented, "He came to town from West Palm Beach in October, got this job in December, and then bellied up according to the file." Mr. Cseak said, "Based on the Findings of Fact and Conclusions of Law, I **move** to order the following disciplinary action: Level 3, Suspension of his license for 360 days, and pay an administrative fee of \$205." Ms. Noto noted, "He's state certified." Mr. Reisinger commented, "You can just restrict his permitting privileges." Mr. Cseak said, "Level 3, Suspension of his permitting privileges for 360 days, and pay an administrative fee of \$205." Mr. Oldakowski **seconded** the motion, which **passed unanimously** by voice vote. Mr. Cseak said, "I **move** to recommend to the CILB that a Letter of Reprimand be placed in the contractor's file." Mr. Oldakowski **seconded** the motion, which **passed unanimously** by voice vote.

Carol M. Heintz, CMC
Assistant City Clerk
City of Port St. Lucie
Ph: 772-871-7325

9. DISCIPLINARY HEARINGS—TABLED:

City of Port St. Lucie, Mark Brockway
Vs.

Edward Louderback Jr., Sign Connection of the T/C Inc

**642 SW Port St Lucie Blvd, 1006 SW St Lucie West Blvd,
10272 S US Hwy 1, 8958 S US Hwy 1, 2076 NW Courtyard**

**VIOLATION OF:
FBC 105.4 & PSL Code Sect 150.105.4**

“Conditions of Permits” *“every permit issued shall become invalid... if the work authorized is suspended or abandoned for a period of 6 months”(105.4.1.3) . “work shall be considered active when permit has rec'd an approved inspection within 180 days.”*

City of Port St. Lucie, Kevin Pierce
Vs.

Steve Singer, Definitely Different Home Repairs LLC

351 SW Panther Trace

**VIOLATION OF:
FBC 105.1& PSL Code Sect 150.105.1**

“Required Permits” *“any owner or authorized agent who intends to... replace any mechanical system ... shall first make application... and obtain the required permit.”*

10. DISCIPLINARY HEARINGS:

City of Port St. Lucie, Matthew Boettcher
Vs.

Richard M Levinson, Service America Enterprises Inc

**462 SW Meadow Ter, 1430 SW St Lucie West Blvd,
2537 SE Charleston Dr, 962 SE Breakwater Ave,
1528 Royal Grn Cir #204, 200 NW Liseron Way**

**VIOLATION OF:
FBC 105.4 & PSL Code Sect 150.105.4**

“Conditions of Permits” *“every permit issued shall become invalid... if the work authorized is suspended or abandoned for a period of 6 months”(105.4.1.3) . “work shall be considered active when permit has rec'd an approved inspection within 180 days.”*



City of Port St. Lucie, Kevin Pierce
Vs.

Clifford Russ, Skyhigh Siding & Roofing

1797 SW Monterey Ln



**VIOLATION OF:
FBC 105.4 & PSL Code Sect 150.105.4**

“Conditions of Permits” *“every permit issued shall become invalid... if the work authorized is suspended or abandoned for a period of 6 months”(105.4.1.3) . “work shall be considered active when permit has rec'd an approved inspection within 180 days.”*



City of Port St. Lucie, Dennis Millward
Vs.

Frederick B Ellis III, Alias Signs LLC

1901 SW South Macedo Blvd, 3259 SW Port St Lucie Blvd

**VIOLATION OF:
Florida State Statute 489.129(1)(o)
Port St Lucie Code Sect 150.520.3(m)
Port St Lucie Code Sect 150.520.3(h)**

**“Proceeding w/out inspections”
“Knowingly violating applicable building codes.”**





CITY OF PORT ST. LUCIE

CITY CLERK'S OFFICE



"A City for All Ages"

A CITY FOR ALL AGES

CERTIFIED MAIL

August 31, 2012

Clifford Russ
Skyhigh Siding and Roofing
901 Northpoint Pkwy #204
West Palm Beach, FL 33407

RE: Appeal of the decision made on August 9, 2012, by the City of Port St. Lucie Contractors' Examining Board re:

Violation of:

FBC 105.4 and Port St. Lucie City Code Section 150.105.4

Dear Mr. Russ:

Please be advised that your request for appeal to the City Council from the decision of the Contractors' Examining Board has been scheduled for the Monday, September 24, 2012, City Council meeting to be held at 7:00 p.m., or as closely thereafter as business permits, in the Port. St. Lucie Council Chambers, 121 SW Port St. Lucie Boulevard, Port St. Lucie, Florida.

Any back-up material you wish to have put into the packet should be delivered to the City Clerk's Office by 12:00 noon on Wednesday, September 19, 2012, at the latest.

If you should have any questions, please do not hesitate to contact me at 344-4370.

Sincerely,

Karen A. Phillips, CMC
City Clerk

CC: Joel Dramis, Building Official
Roger G. Orr, City Attorney
Donna Noto, Building Permit Specialist, Building Department
Robert M. Lewis, Esq., Law Office of Robert M. Lewis, LLC

REPORTING OFFICER NARRATIVE

West Palm Beach Police Department

OCA 2012-0012871
Date / Time Reported Mon 08/06/2012 10:27

Victim
SKY HIGH

Offense
FRAUD ALL OTHER

On 8-6-12 I spoke with victim Rene Jaimes Via telephone regarding a fraud. He told me the following;

On 6-18-12 unknown suspect(s) had broken into the business mailbox. at that time it was unclear if any mail was taken. Over the past month or so starting 6-18-12 some one has been using his check card.. Jaimes advised me the card is being used at the race-trac located at 2995 45th Street. The card is also being used at the Bank of America located at 5337 N. Military Trail.

Bank of America advised Jaimes that they would only release information to the police. I had Officer Josh Martin respond to the business in order to obtain the bank statements from Jaimes. Officer Martin also responded to WalMart and BOA to recover evidence of the purchases. See his supplement.

At the time of this writing, The unknown Suspect(s) have removed \$32,000.00 from his account. In checking CAD we have been to this Complex on several occasions due to tampering w/mail boxes. No report has been written on the previous calls.

Incident Report Suspect List

West Palm Beach Police Department

OCA: 2012-0012871

1 Name (Last, First, Middle) <i>FAUSTEN, RETCNICK</i>		Also Known As				Home Address <i>5689 MARY LN WEST PALM BEACH, FL 33407-- 561-255-0047</i>				
Business Address										
DOB.	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State.
<i>02/14/1983</i>	<i>29</i>	<i>B</i>	<i>M</i>	<i>N</i>	<i>509</i>	<i>160</i>	<i>BLK</i>	<i>BRO</i>	<i>DRK</i>	<i>F235720830540</i>
Scars, Marks, Tattoos, or other distinguishing features <i>TATT LFT ARM / ZOE; TATT RIGH NECK / ZOE; TATT LFOR ARM / "MOB"</i>										
Reported Suspect Detail		Suspect Age	Race	Sex	Eth	Height	Weight	SSN		
Weapon, Type	Feature	Make	Model			Color	Caliber	Dir of Travel Mode of Travel		
Vch Yr/Make/Model		Drs	Style		Color	Lic/St		VIN		
Notes						Physical Char				

CASE SUPPLEMENTAL REPORT

Printed: 08/21/2012 15:17

West Palm Beach Police Department

OCA: 20120012871

THE INFORMATION BELOW IS CONFIDENTIAL - FOR USE BY AUTHORIZED PERSONNEL ONLY

Case Status: *FURTHER INVESTIGATION* Case Mng Status: *FURTHER INVESTIGATION* Occured: *06/15/2012*
Offense: *FRAUD ALL OTHER*

Investigator: *MARTIN, JOSH (01655)* Date / Time: *08/06/2012 13:11:43, Monday*
Supervisor: *SHAW, RAYMOND (01432)* Supervisor Review Date / Time: *08/07/2012 03:19:05, Tuesday*
Contact: Reference: *Supplement*

On Monday, 08/06/2012 at approximately 1116 hours I responded to 901 Northpoint Parkway # 204 in reference to a report of fraudulent activity to a bank account.

Upon arrival, I made contact with Rene Jaimes. Ofc R Howard had taken the initial report over the phone and Jaimes had some paperwork from the bank listing numerous fraudulent transactions that occurred on his account. I collected the paperwork and forwarded this up to Det Utecht.

I noticed several of the transactions were for Walmart store # 4446. This is the store in the City limits of West Palm Beach off of 45th St. I responded there and gave them a few dates and they were able to provide video of the person making the transactions. The person seen on video is a Black male and with him is a Black female who has a small child with her. In one video the male is seen wearing a White jersey style shirt. The other video shows him wearing a Purple shirt.

It should be noted that a few other charges were made at the Soaphia Laundromat at 5335 N Military Trail. I went by and spoke with the clerk and showed her a still photo of the Black male from the video at Walmart. I asked her if she has ever seen the person in the laundromat before. She said yes, and said he drives a White Ford Explorer. She also stated that a female is usually with him, but she usually waits in the car and does not come in.

Several hours later, after sharing this information with Ofc Mason, he observed a White Ford Explorer run the Red light at 45th St and Military Trail. Ofc Mason conducted a traffic stop on the vehicle and notified me that he may have my suspect stopped in Robinson Village on his traffic stop. I responded and compared the male (identified as B/M Retenick Fausten) to the photo from the Walmart video stills. It appears to look like the suspect. I notified Det Sgt Lefont and explained the situation to him and that we may have the suspect present. He said to complete a good Field Interview Card and forward to CID (Det Utecht). An interoffice envelope was prepared with a copy of the video, still pictures from Walmart, and the FIC from today. It was placed in the CID basket to be delivered tomorrow morning. All other evidence was dropped off and placed in WPBPD evidence locker.

Ofc Mason issued Fausten several citations.

This concludes my involvement in this case at this time.

User: MSMITH	WEST PALM BEACH POLICE DEPARTMENT	08/21/12 15:16:50
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Event Report

Event ID: 12-00088357 Call Ref #: 166 Date/Time Received: 05/13/12 22:18:35

Rpt #:	Call Source: SELF	Prime 2180 Unit: IARRELL, KEVIN A	Services Involved			
			LAW			
Location: 901 NORTHPOINT PKWY			BUSINESS OFFICE COMPLEX			
X-ST: NORTHPOINT BLVD			Jur: CAD		Service: LAW Agency: WPB	
VILLAGE BLVD			St/Beat: 18		District: DIV1 RA:	
Business: NORTHPOINT INDUSTRIAL PARK			Phone: () -		GP: G18A	
Nature: POLICE SERVICE CALL		Alarm Lvl: 1	Priority: 4	Medical Priority:		
Reclassified Nature:						
Caller:			Alarm:			
Addr:			Phone: () -		Alarm Type:	
Vehicle #:	St: FL	Report Only: No	Race:	Sex:	Age:	
Call Taker: SBATES			Console: DIV1			
Geo-Verified Addr.: Yes		Nature Summary Code:	Disposition: CAD	Close Comments:		
<p>Notes: Security Guard: Melvin Jaffe W/M 07/26/46 Weiser Security (561) 641-4404 advised the postal mailboxes to the office properties were found unlocked and thought that it was usual for them to be unlocked. The boxes showed no signs of forced entry possibly neglect. [05/13/12 22:25:06 Unit:2180] being flagged down by sec ref damage to property [05/13/2012 22:18:35 SBATES]</p>						

	<u>Time From Call Received</u>			
Call Received: 05/13/12 22:18:35	: :	Unit Reaction: : :	(1st Dispatch to 1st Arrive)	
Call Routed: 05/13/12 22:18:35	: :	En-Route: : :	(1st Dispatch to 1st En-Route)	
Call Take Finished: 05/13/12 22:18:35	: :	On-Scene: 000:09:37	(1st Arrive to Last Clear)	
1st Dispatch: 05/13/12 22:18:35	: :	(Time Held)		
1st En-Route:	: :			
1st Arrive: 05/13/12 22:18:35	: :	(Reaction Time)		
Last Clear: 05/13/12 22:28:12	000:09:37			

Unit	Empl ID	Type	Description	Time Stamp	Radio Log	Close Code	User
					Comments		
2180	01637	D	Dispatched	05/13/12 22:18:35	Stat/Beat: 18;being flagged down by sec ref		SBATES
2180	01637	A	Arrived	05/13/12 22:18:35	Stat/Beat: 18;being flagged down by sec ref		SBATES
2180	01637	C	Cleared	05/13/12 22:28:12		CAD	Unit:2180

Unit	Empl ID	Type	Description	Time Stamp	Event Log	Close Code	User
					Comments		
		TR	Time Received	05/13/12 22:18:35	By: SELF		SBATES
		FIN	Finished Call Taking	05/13/12 22:18:35			SBATES
		CHG	Changed Nature	05/13/12 22:21:43	DAMAGE --> POLICE SERVICE CALL		Unit:2180
		ARM	Added Remarks	05/13/12 22:25:06			Unit:2180

Event ID: 12-00088357 Call Ref #: 166 **POLICE SERVICE CALL at 901 NORTHPOINT PKWY**

Unit	Empl ID	Type	Description	Time Stamp	Event Log Comments	Close Code	User
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User: MSMITH WEST PALM BEACH POLICE DEPARTMENT 08/21/12 15:17:02

Event Report

Event ID: 12-00111460 Call Ref #: 555 Date/Time Received: 06/18/12 13:41:32

Rpt #:	Call Source: PHONE	Prime 1181 Unit: MARTIN, JOSH	Services Involved			
			LAW			
Location: 901 NORTHPOINT PKWY		BUSINESS OFFICE COMPLEX				
X-ST:	NORTHPOINT BLVD	Jur: CAD	Service: LAW	Agency: WPB		
	VILLAGE BLVD	St/Beat: 18	District: DIV1	RA:		
Business:	NORTHPOINT INDUSTRIAL PARK	Phone: () -	GP: G18A			
Nature:	SUSPICIOUS INCIDENT	Alarm Lvl: 1	Priority: 4	Medical Priority:		
Reclassified Nature:						
Caller:	DAVIS, TIFFANY	Phone: (407) 509-8696		Alarm:		
Addr:	901 NORTHPOINT PKWY			Alarm Type:		
Vehicle #:	St:	Report Only: No	Race:	Sex:	Age:	
Call Taker:	MMACKEY	Console: RELF				
Geo-Verified Addr.:	Yes	Nature Summary Code:	Disposition: CAD	Close Comments:		
<p>Notes: Tiffany Davis DOB 03/14/80 (407) 509-8696 stated that someone keeps opening the mailboxes and messing up the locks. She notified the postal inspector and they recommended that she install a camera. Incident was documented for reporting purposes. Is occurring on weekends usually. [06/18/12 14:17:34 Unit:1181] (1181) COMPL 97 [06/18/12 14:11:06 EMACKEY] ADV WITHIN AN HOUR [06/18/12 13:42:32 MMACKEY] 4 mailboxes have been broken into....compl will be 97 in a blue ford f150 truck to make report...ongoing problem [06/18/12 13:42:16 MMACKEY]</p>						

	Time From Call Received		
Call Received: 06/18/12 13:41:32			
Call Routed: 06/18/12 13:42:34	000:01:02	Unit Reaction: 000:04:28	(1st Dispatch to 1st Arrive)
Call Take Finished: 06/18/12 13:42:34	000:01:02	En-Route: : :	(1st Dispatch to 1st En-Route)
1st Dispatch: 06/18/12 13:47:02	000:05:30 (Time Held)	On-Scene: 000:30:55	(1st Arrive to Last Clear)
1st En-Route: 06/18/12 13:47:02	000:05:30		
1st Arrive: 06/18/12 13:51:30	000:09:58 (Reaction Time)		
Last Clear: 06/18/12 14:22:25	000:40:53		

Unit	Empl ID	Type	Description	Time Stamp	Radio Log Comments	Close Code	User
1181	01655	D	Dispatched	06/18/12 13:47:02	Stat/Beat: 18B		EMACKE
1181	01655	E	En-Route	06/18/12 13:47:02	Stat/Beat: 18B		EMACKE
1181	01655	A	Arrived	06/18/12 13:51:30			EMACKE
1181	01655	ENT	Entered Vehicleid	06/18/12 14:21:21	[Vin:] 1FTRX12W77NA21368 [licpl_no:]		Unit:1181
1181	01655	C	Cleared	06/18/12 14:22:25		CAD	Unit:1181

Unit	Empl ID	Type	Description	Time Stamp	Event Log Comments	Close Code	User
		TR	Time Received	06/18/12 13:41:32	By: PHONE		MMACK
		ENT	Entered Street	06/18/12 13:41:37	901 NORTHPOINT PKWY		MMACK
		ENT	Entered Nature	06/18/12 13:41:48	LARCENY		MMACK
		ENT	Entered Remarks	06/18/12 13:42:16			MMACK

Event ID: 12-00111460 Call Ref#: 555 **SUSPICIOUS INCIDENT at 901 NORTHPOINT PKWY**

Unit	Empl ID	Type	Description	Time Stamp	Event Log Comments	Close Code	User
		ENT	Entered CallerNm	06/18/12 13:42:22	DAVIS, TIFFANY		MMACK
		ENT	Entered CallerPh	06/18/12 13:42:28	4075098696		MMACK
		ARM	Added Remarks	06/18/12 13:42:32			MMACK
		FIN	Finished Call Taking	06/18/12 13:42:34			MMACK
		ARM	Added Remarks	06/18/12 14:11:06			EMACKF
		ARM	Added Remarks	06/18/12 14:17:34			Unit:1181
1181		NCIC QRY:	Vehicles	06/18/12 14:21:22	UNIT:1181 State=FL VIN=		Unit:1181
1181		NCIC QRY:	Drivers	06/18/12 14:21:24	UNIT:1181 C		Unit:1181
		CHG	Changed Nature	06/18/12 14:22:15	LARCENY --> SUSPICIOUS INCIDENT		Unit:1181

User: MSMITH	WEST PALM BEACH POLICE DEPARTMENT	08/21/12 15:17:15
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Event Report

Event ID: 12-00088525 Call Ref #: 337 Date/Time Received: 05/14/12 08:22:09

Rpt #:	Call Source: PHONE	Prime 1170 Unit: WILLIAMS, PHILLIP R.	Services Involved	
			LAW	
Location: 901 NORTHPOINT PKWY		BUSINESS OFFICE COMPLEX		
X-ST:	NORTHPOINT BLVD	Jur: CAD	Service: LAW	Agency: WPB
	VILLAGE BLVD	St/Beat: 18	District: DIV1	RA:
Business:	NORTHPOINT INDUSTRIAL PARK	Phone: () -	GP: G18A	
Nature: LARCENY	Alarm Lvl: 1	Priority: 4	Medical Priority:	
Reclassified Nature:				
Caller: GRIECO, MARK				Alarm:
Addr: 901 NORTHPOINT PKWY	Phone: (561) 687-0148	Alarm Type:		
Vehicle #:	St:	Report Only: No	Race:	Sex: Age:
Call Taker: SCLAIRE		Console: CT2		
Geo-Verified Addr.: Yes		Nature Summary Code:	Disposition: CAD	Close Comments:
Notes: MET WITH VICTIM, MR.GREICO. HE SAID THAT HE HAD ALREADY MADE A COMPLAINT TO THE POST OFFICE, WHO OWNS THE SUBJECT MAIL BOXES. [05/14/12 08:59:11 Unit:1170] WAS ADVISED W/IN AN HRS TIME [05/14/12 08:25:19 SCLAIRE] GRIECO AND SCHOLERA LAW OFFICES...THEIR MAILBOX BANK AREA.....MAILBOXES HAVE BEEN BROKEN INTO, MALE TAKEN [05/14/12 08:24:54 SCLAIRE] STE 108..... [05/14/12 08:23:32 SCLAIRE]				

Call Received: 05/14/12 08:22:09	<u>Time From Call Received</u>	
Call Routed: 05/14/12 08:25:24	000:03:15	Unit Reaction: 000:14:34 (1st Dispatch to 1st Arrive)
Call Take Finished: 05/14/12 08:25:24	000:03:15	En-Route: 000:00:07 (1st Dispatch to 1st En-Route)
1st Dispatch: 05/14/12 08:26:26	000:04:17 (Time Held)	On-Scene: 000:18:23 (1st Arrive to Last Clear)
1st En-Route: 05/14/12 08:26:33	000:04:24	
1st Arrive: 05/14/12 08:41:00	000:18:51 (Reaction Time)	
Last Clear: 05/14/12 08:59:23	000:37:14	

					Radio Log		Close Code	User
Unit	Empl ID	Type	Description	Time Stamp	Comments			
1170	01036	D	Dispatched	05/14/12 08:26:26	Stat/Beat: DIV1		MMACK	
1170	01036	E	En-Route	05/14/12 08:26:33			MMACK	
1170	01036	A	Arrived	05/14/12 08:41:00			Unit:1170	
1170	01036	C	Cleared	05/14/12 08:59:23		CAD	Unit:1170	

					Event Log		Close Code	User
Unit	Empl ID	Type	Description	Time Stamp	Comments			
		TR	Time Received	05/14/12 08:22:09	By: PHONE		SCLAIRE	
		ENT	Entered Street	05/14/12 08:22:19	901 NORTHPOINTE		SCLAIRE	
		CHG	Changed Street	05/14/12 08:22:30	901 NORTHPOINTE --> 901 NORTHPOINT		SCLAIRE	
		ENT	Entered AddSt	05/14/12 08:22:34	BUSINESS OFFICE COMPLEX		SCLAIRE	
		ENT	Entered Nature	05/14/12 08:22:43	LARCENY		SCLAIRE	
		ENT	Entered	05/14/12 08:23:07	GRIECO, MARK		SCLAIRE	

Event ID: 12-00088525 Call Ref #: 337 LARCENY at 901 NORTHPOINT PKWY

Unit	Empl ID	Type	Description	Time Stamp	Event Log Comments	Close Code	User
		ENT	Entered CallerPhone	05/14/12 08:23:18	5616870148		SCLAIRE
		ARM	Added Remarks	05/14/12 08:23:32			SCLAIRE
		ENT	Entered Remarks	05/14/12 08:23:33			SCLAIRE
		ARM	Added Remarks	05/14/12 08:24:54			SCLAIRE
		ARM	Added Remarks	05/14/12 08:25:19			SCLAIRE
		FIN	Finished Call Taking	05/14/12 08:25:24			SCLAIRE
		ARM	Added Remarks	05/14/12 08:59:11			Unit:1170

AFFIDAVIT OF MICHAEL HOSKIN

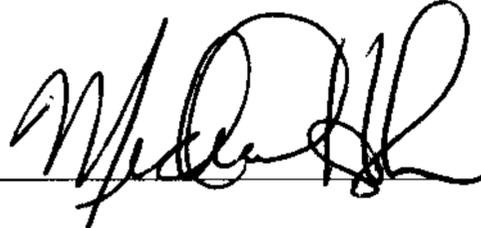
STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

BEFORE ME, the undersigned authority, personally appeared MICHAEL HOSKIN who, after being duly sworn, deposes and states that:

1. That my name is Michael Hoskin.
2. That I am over the age of 18, a resident of St. Lucie County, Florida, and otherwise *sui juris*.
3. That I have personal knowledge of the matters contained herein.
4. That in January 2012, I began employment with Skyhigh Siding & Roofing, Inc., as a salaried employee.
5. That my work station is located to the rear of the office, located at 901 Northpoint Parkway, Suite 204, West Palm Beach, Palm Beach County, Florida 33407, and is adjacent to the building's fire exit, which I primarily use for coming and going.
6. That while I do not have an independent recollection, I have been advised by "Donna", of the City of Port St Lucie, that I "signed" for a registered letter on July 23, 2012 at approximately 12:07PM, addressed to Clifford Russ, Skyhigh's General Contractor.
7. That it is more than likely that as I was heading out the front door to lunch, on the above date and time, I was intercepted by the carrier, who asked me to sign for the letter, which I did. Then, as habit would dictate, I left the parcel, unopened, on the

receptionist's desk as I had done in the past on four or five occasions when I signed for similar mail.

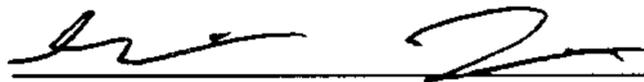
FURTHER AFFIANT SAYETH NAUGHT.



MICHALE HOSKIN

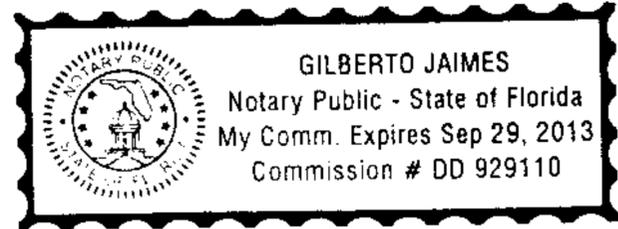
STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

I HEREBY CERTIFY, that on this 10th day of September, 2012, before me, an officer duly qualified to take acknowledgments, personally appeared MICHAEL HOSKIN [X] who is personally known to me, and who did take an oath and who executed the foregoing instrument and he acknowledged before me that he executed the same.



NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires: *Sept 29 2013*



AFFIDAVIT OF CLIFFORD RUSS

STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

BEFORE ME, the undersigned authority, personally appeared CLIFFORD RUSS who, after being duly sworn, deposes and states that:

1. That my name is Clifford Russ.
2. That I am over the age of 18, a resident of Palm Beach County, Florida, and otherwise *sui juris*.
3. That I have personal knowledge of the matters contained herein.
4. That I've been a licensed General Contractor for Monroe, Dade and Broward Counties in the State of Florida, since 1967 and in June of 2003, I was grandfathered as statewide licensed General Contractor and have been ever since.
5. That all times material hereto, I was the licensed qualifier for the general contracting phase for Skyhigh Siding & Roofing, Inc., a roofing company with its principal headquarters in West Palm Beach, Palm Beach County, Florida, from 2007 to the present.
6. That on or about August 20, 2010, a vehicle crashed into the residence of Salvatore and Maria Dragotta, located at 1797 SW Monterey Lane, Port St. Lucie, Florida.
7. The vehicle struck the octogenarian's home with such velocity that the vehicle transversed through the living room and impacted the interior wall adjacent to the kitchen, knocking several cupboards off the kitchen wall. See Pictures attached

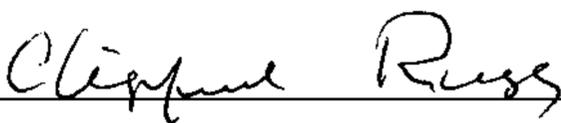
hereto as Appendix "A".

8. That at some point, Skyhigh Siding & Roofing was contacted and timely responded to perform emergency repairs to the subject residence.
9. That shortly thereafter, a permit application was submitted to the City of Port St. Lucie regarding the project herein, which typically takes between three to five days for issuance. However, in this case, several months went by without issuance and Plans Examiner Lyle Nichols, with the City of Port St. Lucie, kept requesting various documents and in essence every time documents were submitted at his request, he again would require additional documents.
10. That after the time had expired for the application processing phase, the project had been fully completed, and I did not reapply for a building permit.
11. That both Renee James, the general manager of Skyhigh Siding and Roofing, Inc. and I met with the Plans Examiner, Nichols, at a minimum of three times regarding this project. However again as stated above, he kept requiring more and more information and/or documents at every such meeting, which were not mentioned at the previous meeting.
12. That it is believed that the initial file on this project was misplaced by the Plans Examiner and as such, at some point we were requested to resubmit a Permit Application. Therefore, I believe that the building permit was never issued by the City of Port St. Lucie because of the misplacement of the initial permit package and/or file.
13. That in a letter post marked August 16, 2012, I was notified, for the first time, that this matter came before the Contractor's Examining Board on August 9, 2012, regarding Port St. Lucie City Code Section 150.520., and that I was found guilty via a seven to zero vote

by the board.

14. That I never received Notice of the August 9, 2012 hearing, either via regular mail or via certified or via federal express, presumably sent to me at 901 Northpoint Parkway, Suite 204, West Palm Beach, Florida 33407.
15. That upon inquiry, it was discovered that employee, Michael Hoskin with Skyhigh Siding & Roofing, signed for a registered letter on or about July 23, 2012, at approximately 2:07PM that was addressed to me. See said Affidavit of Michael Hoskin attached hereto as Appendix "B".
16. That upon discovery of the above, I notified my attorney, Robert Lewis, of The Law Office of Robert M. Lewis, LLC, who immediately filed for an appeal with the City of Port St. Lucie, which will be heard on September 24, 2012 at 7PM.
17. That as of the date of executing this Affidavit, I have never seen the correspondence sent to me via Federal Express or Registered Mail regarding the August 9th hearing. Furthermore, on the day of the subject hearing, I was attending a continuing education class regarding my contractor's license in West Palm Beach, Florida. Moreover, had I received notice of the August 9th Hearing, I would have unequivocally been in attendance, as I have an unblemished record with my general contractors license for over four decades.

FURTHER AFFIANT SAYETH NAUGHT.



CLIFFORD RUSS

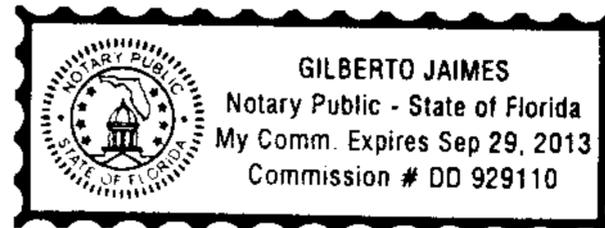
STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

I HEREBY CERTIFY, that on this 11th day of September, 2012, before me, an officer duly qualified to take acknowledgments, personally appeared CLIFFORD ROSS [X] who is personally known to me, and who did take an oath and who executed the foregoing instrument and he acknowledged before me that he executed the same.



NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires: *September, 29, 2013*



CITY OF PORT ST. LUCIE IN RE: THE MATTER OF CLIFFORD RUSS (CGC1505788)

STATE OF FLORIDA)
)ss:
COUNTY OF PALM BEACH)

SUBPOENA FOR TRIAL DUCES TECUM

TO: City of Port St. Lucie
Attn: Lyle Nichols, Plans Examiner
121 S.W. Port St. Lucie Boulevard
Building B
Port St. Lucie, FL 34984

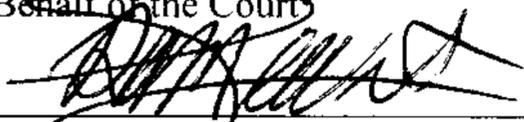
YOU ARE HEREBY COMMANDED to appear before the City Council regarding the Contractors' Examining Board's decision to suspend License No. CGC1505788, at Port St. Lucie Council Chambers, 121 SW Port St. Lucie Boulevard, Port St. Lucie Florida, on **Monday, September 24, 2012 at 7:00PM**. You are also commanded to bring the entire case file regarding the project site located at 1797 SW Monterrey Lane, Port St. Lucie, Florida. If you fail to produce the items listed herein, you may be held in contempt of court. If you have any questions please feel free to contact the undersigned at your leisure.

If you fail to appear, you may be in contempt of court.

YOU ARE SUBPOENAED to appear by the following attorneys and, unless excused from this subpoena by these attorneys or the Court, you shall respond to this subpoena as directed.

WITNESS MY HAND and seal of this Court on September 12, 2012.

Robert M. Lewis, Esquire
Florida Bar No. 628689
On Behalf of the Court

By: 
LAW OFFICE OF ROBERT M. LEWIS, LLC
P. O. Box 18311
Jupiter, FL 33468
Telephone: 561-335-5671
Facsimile: 561-355-5672

Russ file

FLORIDA TRAFFIC CRASH REPORT LONG FORM

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH
RECORDS, NEIL KRIGMAN BUILDING, TALLAHASSEE, FL 32309-0537

DO NOT WRITE IN THIS SPACE

231

Time & Location	DATE OF CRASH	08 28 10	TIME OF CRASH	3:09 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	3:13 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	3:16 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	INVEST. AGENCY REPORT NUMBER	310017928	HSMV CRASH REPORT NUMBER	76208952
	COUNTY / CITY CODE	24/50	FEET or MILE(S)	PORT ST. LUCIE			CITY OR TOWN	PORT ST. LUCIE	COUNTY	ST. LUCIE
	AT THE INTERSECTION OF (street road or highway)	150	FEET or MILE(S)	SW MONTERREY LN.			FROM INTERSECTION OF (street road or highway)	1797 SW MONTERREY LN. (PRIV. RESIDENCE)		

Vehicle 1	DRIVER 1. Phantom ACTION 2. Hit & Run 3. N/A	2	YEAR	05	MAKE	NISSAN	TYPE	01	USE	01	VEH. LICENSE NUMBER	I683HR	STATE	FL	VEHICLE IDENTIFICATION NUMBER	IN4AL11D55C130466															
	TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE																												
Vehicle 2	VEHICLE TRAVELING ON AT	SW MONTERREY LN.		Est MPH	40	Posted Speed	30	EST. VEHICLE DAMAGE	\$10000	1. Disabling 2. Functional 3. No Damage	2	EST. TRAILER DAMAGE		DAMAGE AND CIRCLE DAMAGED AREA(S)	1																
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)	STATE FARM		POLICY NUMBER	5520587594		VEHICLE REMOVED BY:	REMAINED PRIV. PROP.																							
Pedestrian 1	NAME OF VEHICLE OWNER (Check Box if Same As Driver)	<input checked="" type="checkbox"/>		CURRENT ADDRESS (Number and Street)	1149 SW ESTAUGH AVE.		CITY AND STATE	P.S.L., FL 34953		DATE OF BIRTH	10/30/89																				
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN	KRISTIN ASHLEY BUTCHER		CURRENT ADDRESS (Number and Street)	1149 SW ESTAUGH AVE.		CITY, STATE & ZIP CODE	P.S.L., FL 34953		DATE OF BIRTH	10/30/89																				
Pedestrian 2	DRIVER LICENSE NUMBER	B326-501-89-890-0		STATE	FL	DL TYPE	5	REG. END.	2	ALCO/DRUG TEST TYPE	1 Blood 3 Urine 5 None 2 Breath 4 Refused		RESULTS			ALCO/DRUG	5	PHYS. DEF.	1	RES.	1	RAC.	1	SEX	2	INJ.	1	S. EQUIP.	5	EJECT.	1
	HAZARDOUS MATERIAL BEING TRANSPORTED	2		PLACARDED	2		IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD, AND 4 DIGIT NUMBER FROM BOTTOM OF DIAMOND.				WAS HAZARDOUS MATERIAL SPILLED?	2		RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE	2		DRIVER'S PHONE NO.	(772) 446-2206													

Vehicle 2	DRIVER 1. Phantom ACTION 2. Hit & Run 3. N/A		YEAR		MAKE		TYPE		USE		VEH. LICENSE NUMBER		STATE		VEHICLE IDENTIFICATION NUMBER																
	TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE																												
Pedestrian 2	NAME OF VEHICLE OWNER (Check Box if Same As Driver)	<input type="checkbox"/>		CURRENT ADDRESS (Number and Street)			CITY AND STATE			DATE OF BIRTH																					
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN			CURRENT ADDRESS (Number and Street)			CITY, STATE & ZIP CODE			DATE OF BIRTH																					
Pedestrian 2	DRIVER LICENSE NUMBER			STATE		DL TYPE		REG. END.		ALCO/DRUG TEST TYPE	1 Blood 3 Urine 5 None 2 Breath 4 Refused		RESULTS			ALCO/DRUG		PHYS. DEF.		RES.		RAC.		SEX		INJ.		S. EQUIP.		EJECT.	
	HAZARDOUS MATERIAL BEING TRANSPORTED			PLACARDED			IF YES, INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND OR BOX ON PLACARD AND 4 DIGIT NUMBER FROM BOTTOM OF DIAMOND.				WAS HAZARDOUS MATERIAL SPILLED?			RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE			DRIVER'S PHONE NO.														

Code Information	VEHICLE TYPE	VEHICLE USE	TRAILER TYPE	RESIDENCE (Driver / Ped.)	PHYSICAL DEFECTS	ALCOHOL / DRUG USE	LOCATION IN VEHICLE
	011 Automobile 02 Van 03 Light Truck / P.U. - 2 or 4 rear tires 04 Medium Truck - 4 rear tires 05 Heavy Truck - 2 or more rear axles 06 Truck Tractor (Cab-Engine) 07 Motor Home (RV) 08 Bus (driver, seats for 8-15) 09 Bus (driver - seats for over 15) 10 Bicycle 11 Motorcycle 12 Moped 13 All Terrain Vehicle 14 Train 15 Low Speed Vehicle 77 Other	01 Private Transportation 02 Commercial Passengers 03 Commercial Cargo 04 Public Transportation 05 Public School Bus 06 Private School Bus 07 Ambulance 08 Law Enforcement 09 Fire/Rescue 10 Military 11 Other Government 12 Dump 13 Concrete Mixer 14 Garbage or Refuse 15 Cargo Van 77 Other	01 Single Semi Trailer 02 Tandem Semi Trailer 03 Tank Trailer 04 Saddle Mount Flatbed 05 Boat Trailer 06 Utility Trailer 07 House Trailer 08 Pole Trailer 09 Towed Vehicle 10 Auto Transport 77 Other	1 County of Crash 2 Elsewhere in State 3 Non-Resident Out of State 4 Foreign 5 Unknown DL TYER RACE 1. A 2. B 3. C 1 White 4 DL Chaffeur 2 Black 5 E / Operator 3 Hispanic 6 E / Oper.-Res. 4 Other 7 None REQUIRED ENDORSEMENTS 1 Yes 2 No 3 No Endorsement Required	1 No Defects Known 2 Eyesight Defect 3 Fatigue/Asleep 4 Hearing Defect 5 None 6 Seizure, Epilepsy, Blackout 7 Other Physical Defect INJURY SEVERITY 1 None 2 Possible 3 Non-incapacitating 4 Incapacitating 5 Fatal (Within 30 Days) 6 Non-Traffic Fatality	1 Not Drinking or Using Drugs 2 Alcohol - Under Influence 3 Drugs - Under Influence 4 Alcohol & Drugs - Under Influence 5 Had Been Drinking 6 Pending ALCO/DRUG Test Results SAFETY EQUIPMENT IN USE 1 Not in use 2 Seat Belt / Shoulder Harness 3 Child Restraint 4 Air Bag - Deployed 5 Air Bag - Not Deployed 6 Safety Helmet 7 Eye Protection	1 Front Left 2 Front Center 3 Front Right 4 Rear Left 5 Rear Center 6 Rear Right 7 In Body Of Truck 8 Bus Passenger 9 Other EJECTED 1 No 2 Yes 3 Partial

FLORIDA TRAFFIC CRASH REPORT NARRATIVE/DIAGRAM

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS SECTION, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32339-0500

DO NOT WRITE IN THIS SPACE

TIME EMS NOTIFIED (FATALITIES ONLY) <input type="checkbox"/> AM <input type="checkbox"/> PM	TIME EMS ARRIVED (FATALITIES ONLY) <input type="checkbox"/> AM <input type="checkbox"/> PM	DATE OF CRASH 08 28 10	COUNTY / CITY CODE 24/50	INVEST. AGENCY REPORT NUMBER 310017928	HSMV CRASH REPORT NUMBER 76208952
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On 08-28-10 at approx. 0316 hrs. I arrived on scene at 1797 SW Monterrey Ln. in reference to motor vehicle crash. I immediately observed that the front of the residence was missing a large portion of the exterior wall as well as what appeared to be pieces of a motor vehicle scattered over the front yard. I made contact with the only occupant of the residence, Carnella Ferraro (victim/property owner), who stated that while she was asleep in her bedroom she heard a loud crash and when she went out towards her living room to investigate she discovered that her front window, living room and kitchen were completely demolished (damage in excess of \$50,000.) Ms. Ferraro was visibly shaken but told me she was unhurt. When asked if she suffered from any medical conditions she informed me that she suffered high blood pressure and she was later transported by Rescue 10 to the St. Lucie Medical Center for highly elevated blood pressure. Ms. Ferraro stated she did not see how her home was damaged but believed it was a motor vehicle (V1) that had fled the scene.

Upon initial observation of the scene it appeared that a vehicle had been travelling s/b on SW Monterrey Ln. and lost control driving up into the front yard and subsequently striking the front of the residence and continued traveling into the interior of the home (tire tracks were observed in the interior of the home). The vehicle then appeared to back up into the driveway of the residence and then continued forward (at some point striking an upright lamppost in the front yard) traveling s/w through the front yard and back onto SW Monterrey Ln. in a s/b direction leaving fluid marks. Also found on the scene in addition to the tire tracks and damage was a silver colored side view mirror which was lying among the vehicle parts in the driveway.

At approx. 0324 hrs. (approx. eight minutes after the crash was reported) dispatch advised a caller identifying herself as Kristin (D1), called to report that she believed someone had stolen her vehicle, crashed it and then returned it to her residence. Myself, Sgt. Pavlyshin (#311) and Ofc. Steinkraus (#310) left the scene of the accident and arrived at 1149 SW Estaugh Ave. to make contact with Kristin at approx. 0338 hrs.

(Please see continued narrative on page 6 of 7.)

SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.
1	1	JOHNTESSIA SANDIFER	1173 SW GRANADEER ST.	P.S.L., FL	34983	08/15/89	2	2	3	3	2 5	1

VIOLATOR(S)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
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FIRST AID GIVEN BY - NAME: RESCUE 10
 1. Physician or Nurse 2. Paramedic or EMT 3. Police Officer 4. Certified 1st Aider 5. Other: 2
 INJURED TAKEN TO: ST. LUCIE MEDICAL CENTER BY - NAME: RESCUE 10

INVESTIGATION 1. YES IF NO, THEN WHERE? 1. YES
 MADE AT SCENE? 2. NO COMPLETE? 2. NO
 DATE OF REPORT: 08 28 10
 PHOTOS TAKEN 1. YES 2. NO
 IF YES BY WHOM? 1. INVESTIGATING AGENCY 2. OTHER

INVESTIGATOR - RANK & SIGNATURE: OFC. LAWLER *[Signature]* 6417
 BADGE NUMBER: 417 DEPARTMENT: PORT ST. LUCIE
 FHP SO PD OTHER

DIAGRAM

NOT TO SCALE
CS #310017928
Ofc. Lawler #417
DHSMV# 76208952



INDICATE NORTH
WITH ARROW

Heavy damage to house

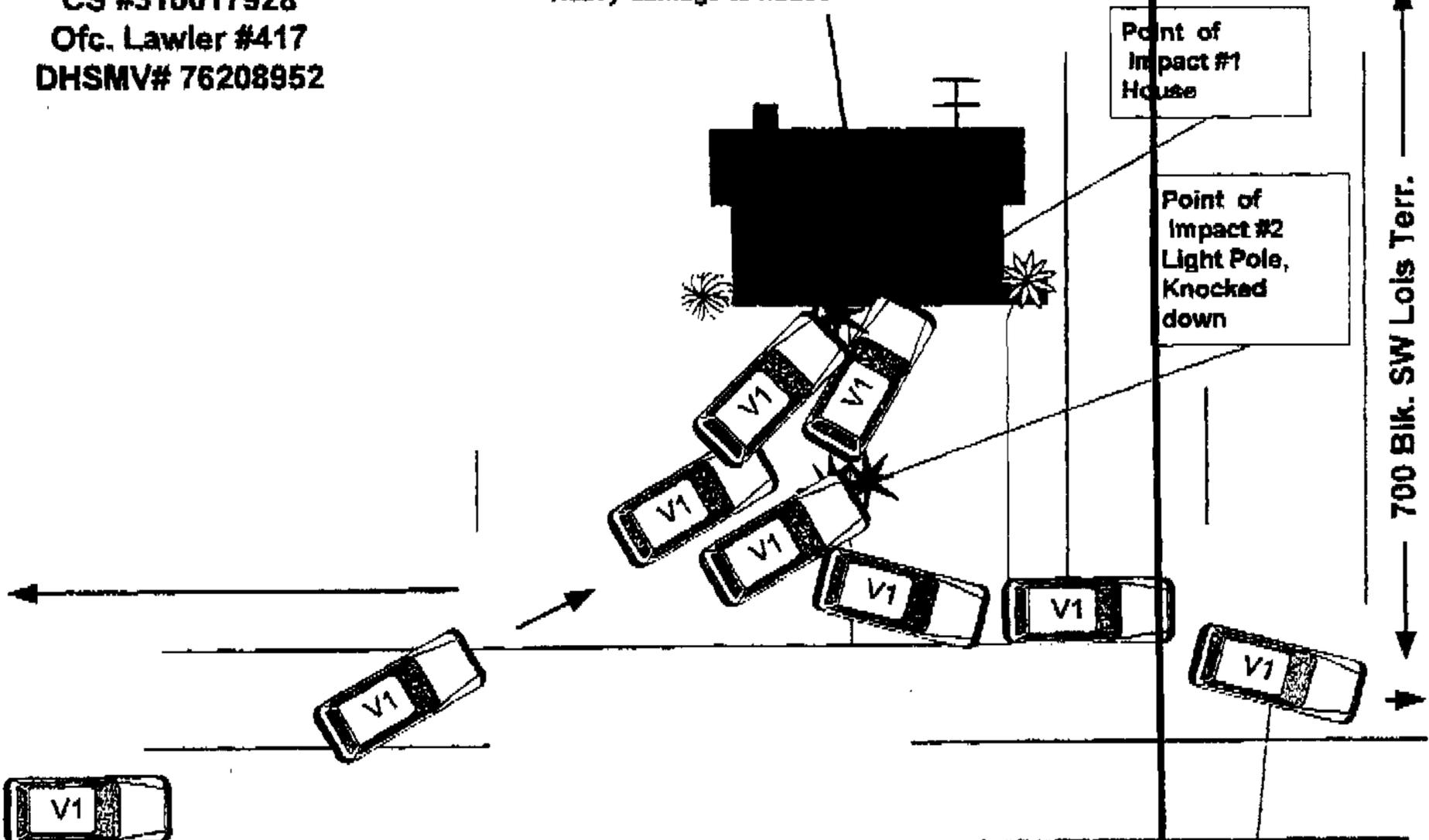
Point of
Impact #1
House

Point of
Impact #2
Light Pole,
Knocked
down

700 Blk. SW Lois Terr.

1700 Blk SW Monterrey
Ln

Vehicle
Feeling Scene



FLORIDA TRAFFIC CRASH REPORT

UPDATE CONTINUATION

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MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32309-0600

DATE OF CRASH 08 28 10	COUNTY / CITY CODE 24/50	INVEST. AGENCY REPORT NUMBER 31001792	HSMV CRASH REPORT NUMBER 76208952
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Section Vehicle	DRIVER 1. Phantom ACTION 2. HR & Run 3. N/A	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	2 3 4 5 6 7 15 16 17 14 13 12 11 10 9		18. Undercarriage 19. Overturn 20. Windshield 21. Trailer				
	TRAILER OR TOWED VEHICLE INFORMATION								SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)						
	VEHICLE TRAVELING N S E W		ON	AT	Est MPH	Posted Speed	EST. VEHICLE DAMAGE	1. Disabling 2. Functional 3. No Damage		EST. TRAILER DAMAGE					
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)						POLICY NUMBER		VEHICLE REMOVED BY:		1. Tow Station List 3. Driver 2. Tow Owner's Request 4. Other				
	NAME OF VEHICLE OWNER (Check Box If Same As Driver)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE				
	NAME OF OWNER (Trailer or Towed Vehicle)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE				
	NAME OF MOTOR CARRIER (Commercial Vehicle Only)						CURRENT ADDRESS (Number and Street)		CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS				
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN						CURRENT ADDRESS (Number and Street)		CITY, STATE & ZIP CODE		DATE OF BIRTH				
	DRIVER LICENSE NUMBER		STATE	DL TYPE	REG. END.	ALC/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused	RESULTS	ALC/DRUG	PHYS DEF	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.
	HAZARDOUS MATERIALS BEING TRANSPORTED	PLACARDED	IF YES INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND ON BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND				WAS HAZARDOUS MATERIAL SPILLED?	RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO.					

Section Vehicle	DRIVER 1. Phantom ACTION 2. HR & Run 3. N/A	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	2 3 4 5 6 7 15 16 17 14 13 12 11 10 9		18. Undercarriage 19. Overturn 20. Windshield 21. Trailer				
	TRAILER OR TOWED VEHICLE INFORMATION								SHOW FIRST POINT OF VEHICLE DAMAGE AND CIRCLE DAMAGED AREA(S)						
	VEHICLE TRAVELING N S E W		ON	AT	Est MPH	Posted Speed	EST. VEHICLE DAMAGE	1. Disabling 2. Functional 3. No Damage		EST. TRAILER DAMAGE					
	MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)						POLICY NUMBER		VEHICLE REMOVED BY:		1. Tow Station List 3. Driver 2. Tow Owner's Request 4. Other				
	NAME OF VEHICLE OWNER (Check Box If Same As Driver)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE				
	NAME OF OWNER (Trailer or Towed Vehicle)						CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE				
	NAME OF MOTOR CARRIER (Commercial Vehicle Only)						CURRENT ADDRESS (Number and Street)		CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBERS				
	NAME OF DRIVER (Take From Driver License) / PEDESTRIAN						CURRENT ADDRESS (Number and Street)		CITY, STATE & ZIP CODE		DATE OF BIRTH				
	DRIVER LICENSE NUMBER		STATE	DL TYPE	REG. END.	ALC/DRUG TEST TYPE 1 Blood 3 Urine 5 None 2 Breath 4 Refused	RESULTS	ALC/DRUG	PHYS DEF	RES.	RACE	SEX	INJ.	S. EQUIP.	EJECT.
	HAZARDOUS MATERIALS BEING TRANSPORTED	PLACARDED	IF YES INDICATE NAME OR 4 DIGIT NUMBER FROM DIAMOND ON BOX ON PLACARD, AND 1 DIGIT NUMBER FROM BOTTOM OF DIAMOND				WAS HAZARDOUS MATERIAL SPILLED?	RECOMMEND DRIVER RE-EXAM. IF YES EXPLAIN IN NARRATIVE		DRIVER'S PHONE NO.					

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
WAS INVESTIGATION MADE AT SCENE? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF NO, THEN WHERE?	IS INVESTIGATION COMPLETE? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF NO, THEN WHY?	DATE OF REPORT	PHOTOS TAKEN 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	IF YES BY WHOM? 1. INVESTIGATING AGENCY <input type="checkbox"/> 2. OTHER <input type="checkbox"/>	
INVESTIGATOR - RANK & SIGNATURE OFC. LAWLER		ID/RADGE NUMBER 417	DEPARTMENT PORT ST. LUCIE		FHP SO PD OTHER <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		

CONTRIBUTING CAUSES - DRIVER / PEDESTRIAN		VEHICLE DEFECT		VEHICLE MOVEMENT		VEHICLE SPECIAL FUNCTIONS	
01 No Defects	<input type="checkbox"/>	01 No Defects	<input type="checkbox"/>	01 Straight Ahead	<input type="checkbox"/>	1 None	<input type="checkbox"/>
02 Defective Brakes	<input type="checkbox"/>	02 Defective Brakes	<input type="checkbox"/>	02 Stopping / Stopped / Stalled	<input type="checkbox"/>	2 Farm	<input type="checkbox"/>
03 Worn / Smooth Tires	<input type="checkbox"/>	03 Worn / Smooth Tires	<input type="checkbox"/>	03 Making Left Turn	<input type="checkbox"/>	3 Police Pursuit	<input type="checkbox"/>
04 Defective / Improper Lights	<input type="checkbox"/>	04 Defective / Improper Lights	<input type="checkbox"/>	04 Backing	<input type="checkbox"/>	4 Recreational	<input type="checkbox"/>
05 Puncture / Blowout	<input type="checkbox"/>	05 Puncture / Blowout	<input type="checkbox"/>	05 Making Right Turn	<input type="checkbox"/>	5 Emergency Operation	<input type="checkbox"/>
06 Steering Mech.	<input type="checkbox"/>	06 Steering Mech.	<input type="checkbox"/>	06 Changing Lanes	<input type="checkbox"/>	6 Construction / Maintenance	<input type="checkbox"/>
07 Windshield Wipers	<input type="checkbox"/>	07 Windshield Wipers	<input type="checkbox"/>	07 Entering / Leaving / Parking Space	<input type="checkbox"/>	SOURCE OF CARRIER INFORMATION	
08 Equipment / Vehicle Defect	<input type="checkbox"/>	08 Equipment / Vehicle Defect	<input type="checkbox"/>	08 Property Parked	<input type="checkbox"/>	1 Not Applicable	<input type="checkbox"/>
77 All Other (Explain in Narrative)	<input type="checkbox"/>	77 All Other (Explain in Narrative)	<input type="checkbox"/>	09 Improperly Parked	<input type="checkbox"/>	2 Shipping Papers	<input type="checkbox"/>
SOURCE OF COLLISION		SOURCE OF COLLISION		PEDESTRIAN ACTION		SOURCE OF CARRIER INFORMATION	
01 On Road	<input type="checkbox"/>	01 On Road	<input type="checkbox"/>	01 Crossing Not at Intersection	<input type="checkbox"/>	3 Vehicle Side	<input type="checkbox"/>
02 Not-On Road	<input type="checkbox"/>	02 Not-On Road	<input type="checkbox"/>	02 Crossing at Mid-Block Crosswalk	<input type="checkbox"/>	4 Driver	<input type="checkbox"/>
03 Shoulder	<input type="checkbox"/>	03 Shoulder	<input type="checkbox"/>	03 Crossing at Intersection	<input type="checkbox"/>	5 Other	<input type="checkbox"/>
04 Median	<input type="checkbox"/>	04 Median	<input type="checkbox"/>	04 Walking Along Road With Traffic	<input type="checkbox"/>		
05 Turn Lane	<input type="checkbox"/>	05 Turn Lane	<input type="checkbox"/>	05 Walking Along Road Against Traffic	<input type="checkbox"/>		
WORK AREA		WORK AREA		06 Working on Vehicle in Road	<input type="checkbox"/>		
01 None	<input type="checkbox"/>	01 None	<input type="checkbox"/>	07 Working	<input type="checkbox"/>		
02 Nearby	<input type="checkbox"/>	02 Nearby	<input type="checkbox"/>	08 Standing / Waiting in Road	<input type="checkbox"/>		
03 Entered	<input type="checkbox"/>	03 Entered	<input type="checkbox"/>	09 Stopping in Pedestrian View	<input type="checkbox"/>		
				77 All Other (Explain in Narrative)	<input type="checkbox"/>		
				84 Unknown	<input type="checkbox"/>		

FIRST / SUBSEQUENT HARMFUL EVENTS		
01 Collision With MV in Transport (Rear End)	18 Collision With Animal	29 MV Ran Into Ditch / Culvert
02 Collision With MV in Transport (Head On)	19 MV Hit Sign / Sign Post	30 Ran Off Road Into Water
03 Collision With MV in Transport (Angle)	20 MV Hit Utility / Pole / Light Post	31 Overturned
04 Collision With MV in Transport (Left Turn)	21 MV Hit Guardrail	32 Occupant Fell From Vehicle
05 Collision With MV in Transport (Right Turn)	22 MV Hit Fence	33 Trailer/Trailer Jackknifed
06 Collision With MV in Transport (Side/Swipe)	23 MV Hit Concrete Barrier Wall	34 Fire
07 Collision With MV in Transport (Backed Into)	24 MV Hit Bridge/Pier/Abutment/Pile	35 Explosion
08 Collision With Parked Car	25 MV Hit Tree / Shrubbery	36 Downhill Runaway
09 Collision With MV on Roadway	26 Collision With Construction Barricade Sign	37 Cargo Load or Shift
10 Collision With Pedestrian	27 Collision With Traffic Gate	38 Separation of Units
11 Collision With Bicycle	28 Collision With Crash Attenuator	39 Median Crossover
12 Collision With Bicycle (Side Lane)	29 Collision With Fixed Object Above Road	77 All Other (Explain in Narrative)
13 Collision With Moped	27 MV Hit Other Fixed Object	
14 Collision With Train	28 Collision With Movable Object On Road	

When we arrived on scene we observed a silver 2005 Nissan four-door parked to the left side of the residence. We observed that there was fresh fluid leading into the driveway of the residence up to the parked silver Nissan. There was major damage to the front end and passenger side of the vehicle with visible paint transfer matching the colors of the residence at 1797 SW Monterrey and the side view mirrors on both sides of the motor vehicle were severely damaged and/or missing. We made contact with the complainant, Kristin Butcher (D1), who stated that someone had stolen her vehicle, crashed it and returned it to her home. Kristin stated that she and her friend, were asleep in the residence. Ofc. Steinkraus asked Kristin how many sets of keys belonged to the car and she said she only had one set and that they were inside the house (we observed no damage to the ignition of the motor vehicle in question). We then asked to speak to Kristin's friend, Johnnessia Sandifer (P1), who was found in the house by Ofc. Steinkraus crying, with an injury to her forehead that was bleeding profusely. Rescue 17 arrived on scene and tended to her wound but she refused transport opting to be taken to a hospital of her choosing later by her mother who arrived on scene. When Ofc. Steinkraus asked Ms. Sandifer how she had injured herself she stated that she and her friend Kristin had been 'chillin' at a friend's house' and after they left while Kristin was driving they drove off the road, crashed into a house and left the scene where they drove to 1149 SW Estauagh Ave. a few minutes later. (Narrative cont. on page 7 of 7.)

ADDITIONAL PASSENGERS												
SEC#	PASS#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

CONTRIBUTING CAUSES - DRIVER / PEDESTRIAN	VEHICLE DEFECT	VEHICLE MOVEMENT	VEHICLE SPECIAL FUNCTIONS
01 No Improper Driving / Action 02 Careless Driving (Explain in Narrative) 03 Failed To Yield-Right-of-Way 04 Improper Decisions 05 Improper Lane Changes 06 Improper Turn 07 Alcohol - Under Influence 08 Drugs - Under Influence 09 Alcohol & Drugs - Under Influence 10 Followed Too Closely 11 Disregarded Traffic Signal 12 Exceeded Safe Speed Limit 13 Disregarded Stop Sign 14 Failed To Maintain Equip. / Vehicle 15 Improper Passing 16 Drove Left of Center 17 Exceeded Stated Speed Limit 18 Obstructing Traffic	01 No Defects 02 Def Brakes 03 Worn / Smooth Tires 04 Defective / Improper Lights 05 Pressure / Blowout 06 Steering Mech. 07 Windshield Wipers 08 Equipment / Vehicle Defect 77 All Other (Explain in Narrative)	01 Straight Ahead 02 Slowing / Stopped / Stalled 03 Making Left Turn 04 Backing 05 Making Right Turn 06 Changing Lanes 07 Entering / Leaving / Parking Space 08 Property Parked 09 Improperly Parked 10 Making U-Turn 11 Passing 12 Driverless or Runaway Vehicle 77 AD Other (Explain in Narrative)	1 None 2 Farm 3 Police Pursuit 4 Recreational 5 Emergency Operation 6 Construction / Maintenance SOURCE OF CARRIER INFORMATION 1 Not Applicable 2 Shipping Papers 3 Vehicle Side 4 Driver 5 Other
19 Improper Load 20 Disregarded Other Traffic Control 21 Driving Wrong Side / Way 22 Fleeing Police 23 Vehicle Modified 24 Driver Distraction (Explain in Narrative) 77 All Other (Explain in Narrative)	POINT OF COLLISION 01 On Road 02 Not On Road 03 Shoulder 04 Median 05 Turn Lane WORK AREA 01 None 02 Nearby 03 Entered	PEDESTRIAN ACTION 01 Crossing Not at Intersection 02 Crossing at Mid-Block Crosswalk 03 Crossing at Intersection 04 Walking Along Road With Traffic 05 Walking Along Road Against Traffic 06 Working on Vehicle in Road 07 Working in Road 08 Standing/Waiting in Road 09 Standing in Pedestrian Ward 77 AD Other (Explain in Narrative) 88 Unknown	

FIRST / SUBSEQUENT HARMFUL EVENT(S)		
01 Collision With MV in Transport Rear End	15 Collision With Animal	29 MV Ran Into Ditch / Culvert
02 Collision With MV in Transport Head On	16 MV Hit Sign / Sign Post	30 Ran Off Road Into Water
03 Collision With MV in Transport (Angle)	17 MV Hit Utility / Pole / Light Pole	31 Overturned
04 Collision With MV in Transport Left Turn	18 MV Hit Guardrail	32 Occupant Fell From Vehicle
05 Collision With MV in Transport (Right Turn)	19 MV Hit Fence	33 Tractor/Trailer Jackknifed
06 Collision With MV in Transport (Sideways)	20 MV Hit Concrete Barrier Wall	34 Fire
07 Collision With MV in Transport (Backed Into)	21 MV Hit Bridge/Pier/Absent/Rail	35 Explosion
08 Collision With Parked Car	22 MV Hit Tree / Strawberry	36 Downhill Runaway
09 Collision With MV on Roadway	23 Collision With Construction Barricade Sign	37 Cargo Load or Shift
10 Collision With Pedestrian	24 Collision With Traffic Gate	38 Separation of Units
11 Collision With Bicycle	25 Collision With Crash Attenuator	39 Median Crossover
12 Collision With Bicycle (Bike Lane)	26 Collision With Fixed Object Above Road	77 AD Other (Explain in Narrative)
13 Collision With Moped	27 MV Hit Other Fixed Object	
14 Collision With Train	28 Collision With Movable Object On Road	

While on scene I asked Kristin if she required rescue and she refused reiterating she was not involved in an accident. Ofc. Steinkraus estimated the distance between the scene of the accident and 1149 SW Estaugh Ave. was approx. 1.5 miles. As he drove back to the scene of the crash he observed fresh fluid at various locations leading from the residence at 1149 SW Estaugh Ave. to the scene of the crash (1797 SW Monterrey Ln.).

Based upon the physical evidence observed at both scenes and the statements made by all parties, I determined probable cause existed to charge the defendant, Kristin Butcher, with violating F.S. 316.061(1) CRASH- leaving the scene without giving information (property damage), F.S. 316.027(1)(b) CRASH- leaving the scene on public or private property without rendering aid and F.S. 316.067 CRASH - False report/information, for which she was subsequently arrested and given citations #6705-FVL, #6706-FVL and #6707-FVL accordingly. The defendant was transported to the St. Lucie County Jail without incident.

The silver Nissan involved in the crash (estimated damage of vehicle over \$10,000) remained on the property of the defendant residing at 1149 SW Estaugh Ave. End of narrative.

ADDITIONAL PASSENGERS												
SECT	PASSE	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.
SECT	PASSE	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.
SECT	PASSE	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.
SECT	PASSE	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.
SECT	PASSE	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.
SECT	PASSE	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	INJ	S. EQUIP.	EJECT.

Violator(s)	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
	SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

COURT DOCKET NO.

USE SEPARATE FORMS FOR EACH DEFENDANT AND FOR MULTIPLE OFFENSES OCCURRING AT DIFFERENT TIME, DATE OR LOCATION

ARREST AFFIDAVIT

FBI NO.

FILE NO.

1. _____
2. _____

<input type="checkbox"/> Fingerprinted <input type="checkbox"/> Identification Only <input type="checkbox"/> Criminal	<input checked="" type="checkbox"/> AFIS	<input checked="" type="checkbox"/> CHECK TRUE NAME	DEFENDANT NAME (LAST, FIRST, MIDDLE) BUTCHER, KRISTIN, ASHLEY	ARE. AGENCY ORI. NO. FLO 5 6 0 2 0 0
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BOOKING OFFICER	JAIL NUMBER	A.K.A.	OBTS NO.
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LOCAL CASE NO. 0310017928	DATE OF BIRTH 10 30 89	PERMANENT ADDRESS (STREET NO. STREET NAME CITY) PHONE 1149 SW ESTAUGH AVE., PSL	STATE FL	ZIP CODE 34953	CITY 24
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DEFENDANT REQUIRED TO APPEAR IN CIRCUIT COURT	SEX M	HEIGHT 5'07"	WEIGHT 160	RACE W	EYE COLOR HAZ	HAIR COLOR BRN
---	-----------------	------------------------	----------------------	------------------	-------------------------	--------------------------

ON _____	SOCIAL SECURITY NUMBER X X X X X X X X X	OCCUPATION OR EMPLOYER UNKNOWN	DISTINGUISHING MARKS TATR ANKLE
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DEFENDANT REQUIRED TO APPEAR IN COUNTY COURT	ARREST DATA DATE: 08, 28, 10 MILITARY TIME: 0 3 4 8 SECTOR: 41	STREET ADDRESS 1149 SW ESTAUGH AVE	CITY FL	STATE 2	CITY 4
--	--	--	-------------------	-------------------	------------------

ON _____	OFFENSE DATA DATE: 08, 28, 10 MILITARY TIME: 0 3 0 9 SECTOR: 41	STREET ADDRESS 1797 SW MONTERREY LN.	CITY FL	STATE 2	CITY 4
----------	---	--	-------------------	-------------------	------------------

Weapons Seized/Type 1. Yes <input checked="" type="checkbox"/> 2. No <input type="checkbox"/>	Residence Type 1. City Florida 2. County 4. Out-of-State	Activity N N/A P Possess	E Sell B Buy T Traffic	R Smuggle D Deliver E Use	K Dispenser/Distributor	M Manufacturer/Producer/Cultivator	Z Other
--	--	--------------------------------	------------------------------	---------------------------------	-------------------------	------------------------------------	---------

CHARGE STATUS	Indication of: Alcohol Influence Drug Influence	Y N Ind - - <input checked="" type="checkbox"/>	Citizenship US	Type N N/A A Amphetamine	B Barbiturate C Cocaine E Heroin	H Marijuana M Marijuana S Opium/Deriv.	P Paraphernalia/Equipment S Synthetic	U Unknown Z Other
---------------	---	--	--------------------------	--------------------------------	--	--	--	----------------------

<input checked="" type="checkbox"/> PC <input type="checkbox"/> CAPAS <input type="checkbox"/> SW <input type="checkbox"/> PW <input type="checkbox"/> PW <input type="checkbox"/> Juv <input type="checkbox"/> PU <input type="checkbox"/> Other	CHARGE / STATUTE NO.	IF OFFENSE ACTIVITY TYPE
---	----------------------	-----------------------------

SEQ NO.	FELONY	FEL TRAF	MISC	MIND TRAF	ORD	OTHER	CHARGE / STATUTE NO.	ACTIVITY	TYPE
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CRASH - LEAVING SCENE WITHOUT GIVING INFO / F.S. 316.061(1)	N	N
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CRASH - LEAVING SCENE ON PRIVATE PROPERTY W/out RENDERING AID / F.S. 316.027(1)(b)	N	N
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CRASH - FALSE REPORT/INFORMATION / F.S. 316.067	N	N

CLERK OF COURT COPY	PRINCIPAL ARRESTING OFFICER / AGENCY (PRINT) OPC. LAWLER / PORT SAINT LUCIE PD	OFFICER ID NO. 417	BONDSMAN / SURETY NAME	BOND AMOUNT
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CO-DEFENDANT'S (LAST NAME, FIRST, MIDDLE)	VICTIM'S NAME CARMELLA FERRARO
---	--

SUMMARY OF OFFENSES AND PROBABLE CAUSE AFFIDAVIT.
The above named defendant was arrested for the following reasons:

See Page Two

PROBABLE CAUSE

The preceding is true to the best of my present knowledge or belief.

Sworn & Subscribed before me this 28th day of AUGUST, 2010

NOTARY / ASA [Signature] LEO

My Commission expires _____

Agency S.L.C.S.O.

Signature Ofc. Lawler #417 JFC #417

* Sequence number taken from fingerprint card containing this OBTS number for this arrest.

ARREST AFFIDAVIT CONTINUATION

Agency Case No. 0310017928	Arrest Date 08 / 28 / 10	Defendant Last Name BUTCHER
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On 08-28-10 at approx. 0316 hrs. I arrived on scene at 1797 SW Monterrey Ln. in reference to motor vehicle crash. I immediately observed that the front of the residence was missing a large portion of the exterior wall as well as what appeared to be pieces of a motor vehicle scattered over the front yard. I made contact with the only occupant of the residence, Carmella Ferraro (victim), who stated that while she was asleep in her bedroom she heard a loud crash and when she went out towards her living room to investigate she discovered that her front window, living room and kitchen were completely demolished (damage in excess of \$50,000.) Ms. Ferraro was visibly shaken but told me she was unhurt. When asked if she suffered from any medical conditions she informed me that she suffered high blood pressure and she was later transported by Rescue 10 to the St. Lucie Medical Center for highly elevated blood pressure. Ms. Ferraro stated she did not see how her home was damaged but believed it was a motor vehicle that had fled the scene.

Upon initial observation of the scene it appeared that a vehicle had been travelling s/w on SW Monterrey Ln. and lost control driving up into the front yard and subsequently striking the front of the residence and continued traveling into the interior of the home (tire tracks were observed in the interior of the home). The vehicle then appeared to back up into the driveway of the residence and then continued forward striking an upright lamppost in the front yard and continued to travel s/w through the front yard and back onto SW Monterrey Ln. in a s/w direction leaving fluid marks. Also found on the scene in addition to the tire tracks and damage was a silver colored side view mirror which was lying among the vehicle parts in the driveway.

At approx. 0324 hrs. (approx. eight minutes after the crash was reported) dispatch advised a caller identifying herself as Kristin, called to report that she believed someone had stolen her vehicle, crashed it and then returned it to her residence. Myself, Sgt. Pavlyshin (#311) and Ofc. Steinkraus (#310) left the scene of the accident and arrived at 1149 SW Estaugh Ave. to make contact with Kristin at approx. 0338 hrs. When we arrived on scene we observed a silver 2005 Nissan four-door parked to the left side of the residence. We observed that there was fresh fluid leading into the driveway of the residence up to the parked silver Nissan. There was major damage to the front end and passenger side of the vehicle with visible paint transfer matching the colors of the residence at 1797 SW Monterrey and the side view mirrors on both sides of the motor vehicle were severely damaged and/or missing. We made contact with the complainant, Kristin Butcher, who stated that someone had stolen her vehicle, crashed it and returned it to her home. Kristin stated that she and her friend, were asleep in the residence. Ofc. Steinkraus asked Kristin how many sets of keys belonged to the car and she said she only had one set and that they were inside the house (we observed no damage to the ignition of the motor vehicle in question). We then asked to speak to Kristin's friend, Johnnessia Sandifer, who was found in the house by Ofc. Steinkraus cying, with an injury to her forehead that was bleeding profusely. Rescue 17 arrived on scene and tended to her wound but she refused transport opting to be taken to a hospital of her choosing later by her mother who arrived on scene. When Ofc. Steinkraus asked Ms.

(Please see page 3 of 3.)

The preceding is true to the best of my present knowledge or belief.

Signature Ofc. Lawler #417
Ofc Lawler #417

Sworn & Subscribed before me this 28th day of AUGUST, 2010
NOTARY/ASA [Signature]
My Commission expires _____ LEO
Agency S.L.C.S.O.

ARREST AFFIDAVIT CONTINUATION

Agency Case No.

0310017928

Arrest Date

08 / 28 / 10

Defendant Last Name

BUTCHER

Sandifer how she had injured herself she stated that she and her friend Kristin had been 'chillin' at a friend's house' and after they left while Kristin was driving they drove off the road, crashed into a house and left the scene where they drove to 1149 SW Estaugh Ave. a few minutes later. While on scene I asked Kristin if she required rescue and she refused reiterating she was not involved in an accident.

Ofc. Steinkraus estimated the distance between the scene of the accident and 1149 SW Estaugh Ave. was approx. 1.5 miles. As he drove back to the scene of the crash he observed fresh fluid at various locations leading from the residence at 1149 SW Estaugh Ave. to the scene of the crash (1797 SW Monterrey Ln.).

Based upon the physical evidence observed at both scenes and the statements made by all parties, I determined probable cause existed to charge the defendant, Kristin Butcher, with violating F.S. 316.061(1) CRASH-leaving the scene without giving information (property damage), F.S. 316.027(1)(b) CRASH-leaving the scene on public or private property without rendering aid and F.S. 316.067 CRASH - False report/information, for which she was subsequently arrested and given citations #6705-FVL, #6706-FVL and #6707-FVL accordingly. The defendant was transported to the St. Lucie County Jail without incident.

The silver Nissan involved in the crash (estimated damage of vehicle over \$10,000) remained on the property of the defendant residing at 1149 SW Estaugh Ave.

End of narrative.

The preceding is true to the best of my present knowledge or belief.

Signature

Ofc. A. Faulk #417
Ofc Lawler #417

Sworn & Subscribed before me this 28TH day of AUGUST, 2010
NOTARY/ASA *[Signature]*
My Commission expires LEO
Agency S.L.C.S.D.



Port St Lucie Police Department Statement Form

* 1149 SW ESTABLISH AVE.

Please fill out in full

Date of Statement: 08/28/10		Time: 0400 HRS.		Case #: 310017928	
Offense: LEAVING THE SCENE OF AN ACCIDENT W/ PROPERTY DAMAGE W/OUT PROVIDING INFORMATION					
Date of Offense: 08/28/10		Time: 0309 HRS.		Suspect (Last, First, Middle): SKA PARRA	
Location of Offense: 1797 SW MONTEPELRY LN.					Zone: 41
Code: W		Code Definitions: V= Victim S= Suspect W= Witness C= Complainant O= Other			
Name (Last, First, Middle): SANDIFER, JOHN TESSIA, CLINIQUE			Age: 21	DOB: 08-15-89	Race: B Sex: F
Address (Res.): 1173 SW GRANADEER ST. PCL			Zip: 34983	Phone: (772) 343-9144	
Address (Bus.):			Zip:	Phone:	
D.L. #: 5531-423-89-795-0		State: FL		Other ID (Specify # & Type):	
I, <u>JOHN TESSIA CLINIQUE SANDIFER</u> do hereby voluntarily make the following statement without threat, coercion, offer of benefit or favor by any persons whomsoever.					
(Narrative): WE JUST LEFT THE AUTO. SHE SAID SHE WAS OK TO DRIVE SO WE WANTED TO GO HOME. WE GOT INTO THE CAR. KRISTIN LOST CONTROL OF THE CAR & WE CRASHED INTO A HOUSE. THEN WE WENT TO KRISTIN'S HOUSE AFTERWARDS.					
~ List stolen items separately (with values) in body of statement ~					
Total Value of Property Stolen/Damaged \$		I will testify in court.		Initial:	
I've received the Victim's Rights package. Initial:		I will prosecute criminally.		Initial:	
Sworn To and Subscribed Before Me, This 28th Day of AUGUST, 2010 Notary Public #417			Under penalties of perjury, I declare that I have read the forgoing document and the facts stated in it are true.		
Law Enforcement <input checked="" type="checkbox"/> Notary Public <input type="checkbox"/>			Signature: <i>[Handwritten Signature]</i>		
Personally Known <input type="checkbox"/>		Arrest Made? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Miranda Warning Read? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Produced Identification <input type="checkbox"/> Type:				Page 1 of 1	

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FLORIDA UNIFORM TRAFFIC CITATION 6705-FVL X

COUNTY OF ST. LUCIE
 CITY OF APPLICABLE PORT ST. LUCIE
 COMPLAINT (RETAINED BY COURT)
 DATE OF VIOLATION: SATURDAY 08 28 10 03:48
 DRIVER: KRISTIN ASHLEY BUTNER
 ADDRESS: 1149 SW ESTABROH AVE.
 CITY: PORT ST. LUCIE FL 34953
 TELEPHONE NUMBER: 10 30 89 W F 517
 LICENSE: B 3 2 6 5 0 1 8 9 8 9 0 0
 EXPIRES: 2012
 VEHICLE: 2005 NISSAN 4D SILVER
 LICENSE TYPE: FL 2011
 VIOLATION: 1797 SW MONTERREY LANE

UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

UNLAWFUL SPEED
 CARELESS DRIVING
 VIOLATION OF TRAFFIC CONTROL DEVICE
 VIOLATION OF RIGHT-OF-WAY
 IMPROPER CHANGE OF LANE OR COURSE
 IMPROPER PASSING
 CHILD RESTRAINT
 DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES, DRUGS, OR OTHER PHYSICAL CONTROL WHILE IMPAIRED OR SUBSTANTIAL PHYSICAL CONTROL WITH UNLAWFUL BLOOD ALCOHOL LEVEL, OR

SAFETY BELT VIOLATION
 EXPIRED TAG
 MORE THAN SIX (6) MONTHS
 NO PROOF OF INSURANCE
 FAILURE TO STOP AT A TRAFFIC SIGNAL

CRASH - Leaving scene without giving information. (with damage)

ADMISSIVE DRIVING IN VIOLATION OF STATE STATUTE 316.061(1)
 YES NO

COURT INFORMATION: ST. LUCIE COUNTY JAIL DATE 08-28-10
 6705-FVL X

APPROX DELIVERED TO: ST. LUCIE COUNTY JAIL DATE 08-28-10

SIGNATURE OF VIOLATOR: ARRESTED
 SIGNATURE OF OFFICER: OFC. LAWLER 417
 NAME AND TITLE OF OFFICER: PATROL

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FLORIDA UNIFORM TRAFFIC CITATION 6706-FVL X

COUNTY OF ST. LUCIE
 CITY OF APPLICABLE PORT ST. LUCIE
 COMPLAINT (RETAINED BY COURT)
 DATE OF VIOLATION: SATURDAY 08 28 10 03:46
 DRIVER: KRISTIN ASHLEY BUTNER
 ADDRESS: 1149 SW ESTABROH AVE.
 CITY: PORT ST. LUCIE FL 34953
 TELEPHONE NUMBER: 10 30 89 W F 517
 LICENSE: B 3 2 6 5 0 1 8 9 8 9 0 0
 EXPIRES: 2012
 VEHICLE: 2005 NISSAN 4D SILVER
 LICENSE TYPE: FL 2011
 VIOLATION: 1797 SW MONTERREY LANE

UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

UNLAWFUL SPEED
 CARELESS DRIVING
 VIOLATION OF TRAFFIC CONTROL DEVICE
 VIOLATION OF RIGHT-OF-WAY
 IMPROPER CHANGE OF LANE OR COURSE
 IMPROPER PASSING
 CHILD RESTRAINT
 DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES, DRUGS, OR OTHER PHYSICAL CONTROL WHILE IMPAIRED OR SUBSTANTIAL PHYSICAL CONTROL WITH UNLAWFUL BLOOD ALCOHOL LEVEL, OR

SAFETY BELT VIOLATION
 EXPIRED TAG
 MORE THAN SIX (6) MONTHS
 NO PROOF OF INSURANCE
 FAILURE TO STOP AT A TRAFFIC SIGNAL

CRASH - Leaving scene on public or private property without rendering aid.

ADMISSIVE DRIVING IN VIOLATION OF STATE STATUTE 316.061(1)(b)
 YES NO

COURT INFORMATION: ST. LUCIE COUNTY JAIL DATE 08-28-10
 6706-FVL X

APPROX DELIVERED TO: ST. LUCIE COUNTY JAIL DATE 08-28-10

SIGNATURE OF VIOLATOR: Arrested
 SIGNATURE OF OFFICER: OFC. LAWLER 417
 NAME AND TITLE OF OFFICER: PATROL

CASE # 310017428

41/



FLORIDA UNIFORM TRAFFIC CITATION 6707-FVL 1

COUNTY OF ST. LUCIE (1) F.P.A. (2) P.D. (3) B.D. (4) OTHER

CITY OF APPEARANCE PORT ST. LUCIE P.S. & P.D. AGENCY

IN THE COUNTY AND JURISDICTION BELONGS TO THE JURISDICTION OF THE COUNTY AND IS RESPONSIBLE TO REPORT TO THE COURT AND TO COMPLY WITH THE CITATION

COMPLAINANT (RETAINED BY COURT)

DATE OF VIOLATION AUG 28 2010 TIME 03:48

DRIVER NAME KRISTIN ASHLEY BUTCHER

ADDRESS 1149 SW ESTAUGH AVE.

CITY PORT ST. LUCIE FL ZIP 34953

PLATE NO. B32650189900

REGISTRATION EXPIRES 2012

VEHICLE MAKE MODEL YEAR NISSAN 4D SUVER 2005

VEHICLE REGISTRATION EXPIRES 2011

LOCATION OF VIOLATION 1797 SW MONTECARRA LANE

- DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CATEGORY.
- UNLAWFUL SPEED
 - CARELESS DRIVING
 - VIOLATION OF TRAFFIC CONTROL DEVICE
 - VIOLATION OF RIGHT-OF-WAY
 - IMPROPER CHANGE OF LANE OR COURSE
 - IMPROPER PASSING
 - CHILD RESTRAINT
 - DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, DRUGS, OR CONTROLLED SUBSTANCES, OR IMPROPER PHYSICAL CONTROL WHILE DRIVING, OR IMPROPER PHYSICAL CONTROL WITH UNLAWFUL BREATHALCOHOLIC ALCOHOL LEVEL, OR
 - SAFETY BELT VIOLATION
 - EXPIRED DRIVER LICENSE
 - FOUR (4) MONTHS OR LESS
 - MORE THAN FOUR (4) MONTHS
 - SIX (6) MONTHS OR LESS
 - NO VALID DRIVER LICENSE
 - MORE THAN SIX (6) MONTHS
 - EXPIRED WHILE LICENSE SUSPENDED OR REVOKED
 - FAILURE TO STOP AT A TRAFFIC SIGNAL

OTHER VIOLATION OR CATEGORY REFERRED TO CRASH - FALSE REPORT / MISCONDUCT

AGGRESSIVE DRIVING IN VIOLATION OF STATE STATUTE 316.067

YES NO YES NO YES NO YES NO YES NO

CRIMINAL VIOLATION COURT APPEARANCE RECEIVED AS INDICATED BELOW

CIVIL VIOLATION COURT APPEARANCE RECEIVED AS INDICATED BELOW

VIOLATION WHICH DOES NOT REQUIRE APPEARANCE IN COURT

COURT INFORMATION DATE TRD TIME

COURT

LOCATION

APPEARANCE TO ST. LUCIE COUNTY JAIL DATE 08-28-10

I AGREE AND PROMISE TO COMPLY AND ABIDE BY THE TERMS AND CONDITIONS SPECIFIED BY THE DETAILING OFFICER, TO ACCEPT AND SIGN THE CITATION AND REPORT TO THE COURT, AND TO COMPLY WITH THE CITATION AND TO COMPLY WITH THE CITATION, CONTACT THE CLERK OF THE COURT.

ARRESTED

REPORTING OFFICER NAME OFFICER LAWRENCE 417

OFFICER ID NO. 417

TRUCK UNIT PATROL





Seal trim J Crew

CLIFFORD RUSS

Skyhigh Siding & Roofing

Certified General Contractor
CGC1505788
Current/Active

FORMAL COMPLAINT ISSUED May 29, 2012
LOCATION(S): 1797 SW Monterey Ln

CASE NUMBER: 13334

To: **CONTRACTORS EXAMINING BOARD**

Hearing Date: **August 9, 2012**

Florida Building Code 105.4
Port St Lucie Code Section 150.105.4

"Conditions of permit"

COMPLAINT / RECEIPTS/CONTRACTOR RESPONSE



CITY OF PORT ST LUCIE

BUILDING DEPARTMENT
Contractor Licensing Division

.....
A CITY FOR ALL AGES

cc

Regular Mail
May 29, 2012

Case #13334

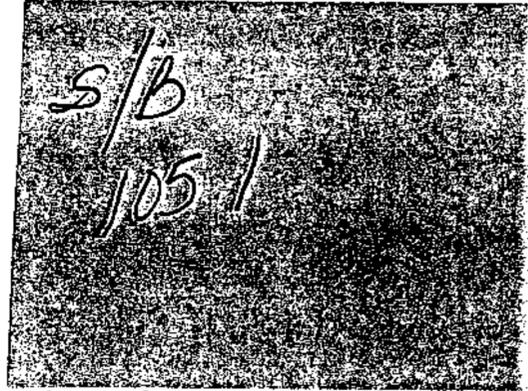
Clifford Russ
Skyhigh Siding & Roofing
901 Northpoint Pkwy #204
W Palm Beach FL 33407

Re: Formal complaint location: 1797 SW Monterey Ln

Allegation:

Violation of:

Florida Building Code 105.4
Port St Lucie Code Section 150.105.4
"Condition of Permits"



Dear Mr. Russ:

Please be advised a *REVISED* formal complaint has been submitted by City Of Port St. Lucie Licensing Investigator, Kevin Pierce, in regard to the above allegations.

For the investigation of the complaint, our office requests that page four be completed and returned to this department by June 28, 2012.

Upon receipt of your response, the complaint will be forwarded to the Review Committee for further investigation. Should you choose not to respond; the complaint will then be forwarded to the Committee on June 28, 2012. The Committee will ascertain if there is just reason to proceed to a formal hearing. Our office will extend proper notification to you on the determination made by the Review Committee. Should the Committee determine probable cause to proceed with a disciplinary hearing, you will be notified in advance of said hearing date and time.

If you need assistance, please contact our office at 772-873-6371.

Sincerely,

Donna Noto
Contractor Licensing
Enclosures

Complaint Response Request.doc

CITY OF PORT ST. LUCIE
CONTRACTOR CERTIFICATION
121 S.W. PORT ST. LUCIE BLVD
PORT ST. LUCIE, FL 34984

**FORMAL COMPLAINT FORM
AGAINST "STATE CERTIFIED" CONTRACTORS**

Kevin Pierce - City of Port St Lucie
Complaints Name
121 SW Port St Lucie Blvd
Street Address
Port St Lucie FL 34984
City State Zip
772-871-5132
Home Telephone Work Telephone

Clifford Russ
Name of Qualifier/Contractor
Skyhigh Siding & Roofing
Name of Company
901 Northpoint Pkwy #204
Street Address
W Palm Beach FL 33407
City State Zip
561-848-3053
Telephone Number

Location of Complaint: 1797 SW Monterey Ln
Sec/Unit⁹ Block 1117 Lot 17 Date of Occupancy: n/a
When was Certificate of Occupancy Issued?: n/a

Have you as the complainant/homeowner ever refused to give permission to the contractor/
subcontractors to complete a project for or correct any code violations: yes no

Did you complain to the company? yes
When? Notice of Non Compliance #13334 sent 11/8/11
What was the response? Violation still exists.

List all persons connected with the company with whom you have been in contact:
Rama Parast, Engineer. Gilbert, Skyhigh, Clifford, Skyhigh, Maria, Homeowner

Have you contacted a private attorney? n/a
Attorney Name: _____
Address: _____
Phone #: _____

Have you contacted any other agencies regarding this problem? n/a
Names of Agency: _____
What was the response? _____

Have you had anyone attempt repairs? n/a Have you had estimates for repairs? n/a
If so, who and when? If so, who and when?
Name: _____ Name: _____
When: _____ When: _____

Please indicate in the space provided, whether in your opinion, the contractor has violated any of the following items, please check only those that apply.

489.113(4) Committing fraud in the practice of contracting

Yes No (If yes, please include documentation)

489.113(4) Committing a willful building code violation

Yes No (include appropriate statute and/or City Ordinance)

FBC 105.1 & PSL Ord 150.105.1 "Required permits"

Fraud – The intentional false representation of a present or past fact made by a person to another who then relies on this fact to act and is thereby damaged as a result.

489.113 (4) – NOTWITHSTANDING THE PROVISIONS OF PARAGRAPH (a), a local construction regulation board may deny, suspend, or revoke the authority of a certified contractor to obtain a building permit or limit such authority to obtaining a permit or permits with specific conditions, if the local construction regulation board has found such a contractor, through the public hearing process, to be guilty of fraud or a willful building code violation within the county or municipality that the local construction regulation board represents.

Please explain your complaint fully and describe events in the order in which they occurred. Give exact dates, time and places. List all representatives with whom you have had contact regarding your complaint:

On December 10, 2010 Mark Brockway, Licensing Investigator, discovered structural repairs being performed at 1797 SW Monterrey Ln, due to a vehicle strike. A permit was submitted the same day by Clifford Russ, Skyhigh Siding & Roofing to repair the damage. Per the plans examiner, the permit could not be approved as submitted and they required additional information from the engineer. There were several conversations throughout the months between myself, the homeowner, the engineer and plan review. As of today, the permit was never approved & is voided since it was in plan review for more than 180 days.

List all witnesses, their addresses and telephone numbers:

I understand that any decision of the Board regarding action taken against a contractor may be appealed to the City Council within fifteen (15) days of the date of the Board's decision, provided that written notice of such appeal shall be filed with the City Clerk's office within that period. I understand, the Board cannot assess fines or order a contractor to perform work.

[Signature]
Signature of Complainant

State of Florida
County of St Lucie



DONNA M. NOTO
MY COMMISSION # EE 080846
EXPIRES: August 4, 2015
Bonded Thru Budget Notary Services

Sworn to (or affirmed) and subscribed before me this 29 day of May 2012
by Kevin Pierce

[Signature]
Signature of Notary Public

Personally known OR Produced Identification
Type of Identification produced: _____

N/A

NO RESPONSE
FROM
CONTRACTOR

LOCAL CODE

tors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

105.4 Conditions of the permit.

105.4.1 Permit intent. A permit issued shall be construed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within 6 months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 6 months after the time the work is commenced.

105.4.1.1 If work has commenced and the permit is revoked, becomes null and void or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work.

105.4.1.2 If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any

work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.

105.4.1.3 Work shall be considered to be in active progress when the permit has received an approved inspection within 180 days. This provision shall not be applicable in case of civil commotion or strike or when the building work is halted due directly to judicial injunction, order or similar process.

105.4.1.4 The fee for renewal reissuance and extension of a permit shall be set forth by the administrative authority.

105.5 Expiration. Reserved.

105.6 Suspension or revocation. Reserved.

105.7 Placement of permit. The building permit or copy shall be kept on the site of the work until the completion of the project.

105.8 Notice of commencement. As per Section 713.135, Florida Statutes, when any person applies for a building permit, the authority issuing such permit shall print on the face of each permit card in no less than 18-point, capitalized, boldfaced type: "WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

105.9 Asbestos. The enforcing agency shall require each building permit for the demolition or renovation of an existing structure to contain an asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of Section

PROBABLE CAUSE STATEMENT

MEMORANDUM

to: Joel Dramis, Building Official
Jack Reisinger, Building Official Designee
Michael Flaxman, Contractors' Examining Board Chairman

from: Donna Noto, Contractor Licensing 

subject: Complaint filed against:
Clifford Russ, Skyhigh Siding & Roofing

date: July 16, 2012

Attached please a complaint filed by Licensing Investigator, Kevin Pierce for the following addresses:

1797 SW Monterey Ln

Contractor holds local certificate of competency and Registered through DBPR

Contractor holds a state certification license.

Staff would like to present the complaint to the review committee, to determine if the complaint should be presented before the Contractor's Examining Board for a formal disciplinary hearing.

Enclosed response from contractor and/or his attorney.

No response from contractor.

Please review and respond as soon as possible.

Thank you.

I FIND PROBABLE CAUSE TO
BELIEVE A VIOLATION OCCURRED.

 7/16/12

I FIND PROBABLE CAUSE TO
BELIEVE A VIOLATION OCCURRED

 7-17-12

Complereviewcommittee.wpd

NOTICE OF HEARING / RECEIPTS

(Right to appear before and be heard by the local enforcement board.)



CITY OF PORT ST LUCIE

BUILDING DEPARTMENT
Contractor Licensing Division

.....
A CITY FOR ALL AGES

CERTIFIED MAIL
REGULAR MAIL

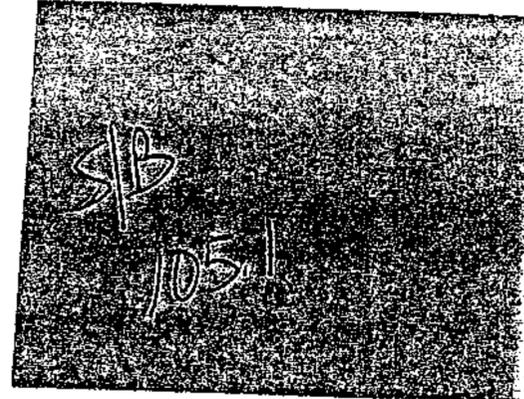
70071490000433909374

July 18, 2012

Clifford Russ
Skyhigh Siding & Roofing
901 Northpoint Pkwy #204
W Palm Beach FL 33407

Re: City of Port St. Lucie
vs
Clifford Russ, Skyhigh Siding & Roofing

Location(s): **1797 SW Monterey Ln**
Allegation(s) **Florida Building Code 105.4**
PSL Code Sec 150.105.4



Dear Mr. Russ:

This letter is regarding the formal complaint(s) that has been submitted by Licensing Investigator, Kevin Pierce, regarding the property(s) noted above.

It has been determined to forward the complaint(s) to the Contractors' Examining Board for a disciplinary Hearing. Should the Board determine the violation was committed, in addition to any disciplinary action, **Administrative Fees will be imposed in the amount of \$205.00 (two hundred five dollars).**

The hearing is scheduled for August 9, 2012 at 10:00 am, in the City Hall Complex, Building A, Council Chambers, 121 SW Port St. Lucie Blvd., Port St. Lucie.

You may wish to be represented at the hearing, by an attorney. Also, please note that all evidence pertinent to your case, should be brought to the hearing by you or your attorney.

This hearing is recorded. If you have any questions, you may contact our office at 772-873-6371.

Sincerely,

Donna Noto
Contractor Licensing Staff

7007 1490 0004 3390 9374

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

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3811, August 2006 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by Printed Name: *[Signature]* C. Date of Delivery: *7/20/12*

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

PORT ST. LUCIE
 Building/Licensing

3. Service Type: Certified Mail Registered Insured Mail Return Receipt for Merchandise

4. Restricted Delivery? (Extra Fee) Yes No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Clifford Russ
 Skyhigh Siding & Roofing
 901 Northpoint Pkwy #204
 W Palm Beach FL 33407

2. Article Number: *111667*
 (Transfer from service lat) 7007 1490 0004 3390 9374

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

Other Related Documents

Complaint Case# 13334

Location Desc	F/C WINDOW	
Address	1797 SW MONTERREY LN	
Lot/Blk/Sect	/	/
Status	PENDING	
Category	INVESTIGATOR GENERATED	
Premises	RESIDENCE	
Complainant	MB/KRP	
Contractor		
Owner		
Home Phone#		
Investigator	PIERCE, KEVIN	
Date Created	12/1/2010 10:00:00 AM	
Date Recheck	12/15/2010	
Description	POSSIBLE NEW FRONT WINDOW W/NO PERMIT. LEFT DOOR HANGER.	
Notes		

PAGE 17 OF 19

Visit Information	Comments
NOTO, DONNA 3/14/2012	NO RESPONSE FROM CONTRACTOR. FORWARDED TO REVIEW COMMITTEE FOR DETERMINATION.
NOTO, DONNA 2/13/2012	NO COMPLIANCE SENT FORMAL W/ RESPONSE DUE BY 3/9/12
NOTO, DONNA 11/8/2011	SENT NON W/ COMP DATE OF 12/9/11
PIERCE, KEVIN 10/28/2011 3:50 PM	NO COMPLIANCE. ISSUE NON TO CLIFFORD RUSS ALLEGING ABANDONMENT OF PROJECT. PERMIT IN PLAN REVIEW SINCE 12/10.
INFORMATION RECORD	
INFORMATION RECORD	

PIERCE, KEVIN US SOUTH ENGINEERING. RAMA PARAST. REQUESTING INFORMATION ABOUT WHAT IS REQUIRED. REFERRED HIM TO PLAN REVIEW

10/24/2011 4:31 PM

PHONE CALL

INFORMATION RECORD

PIERCE, KEVIN

10/24/2011 4:00 PM

PHONE CALL

INFORMATION RECORD

CALL FROM CONTRACTOR ASKING ABOUT ISSUE. I REPEATED THE STATEMENTS I MADE TO GILBERT THIS MORNING. HE ASKED ABOUT WHAT HE NEEDED AND SAID HE HAD EVERYTHING. I REFERRED HIM TO LYLE IN PLAN REVIEW. I SPOKE TO LYLE LATER. HE SAID HE TOLD THE CONTRACTOR THAT THEY NEEDED THE PLANS. LYLE SAID THAT THE CONTRACTOR WAS NOT GOING TO SPEND ANY MORE MONEY ON THE PROJECT. HE DID NOT PROVIDE ANY PLANS TO LYLE, NOR DID HE GIVE LYLE ANY IDEA OF WHEN HE WOULD PROVIDE IT. WITH APPROVAL FROM RUSTY, GRANT UNTIL 10/27/11 FOR COMPLIANCE.

PIERCE, KEVIN

10/24/2011 8:55 AM

PHONE CALL

INFORMATION RECORD

LYLE BROUGHT FILE TO ME. I MADE A FINAL COURTESY CALL TO SKYHIGH AND SPOKE TO GILBERT. I INFORMED HIM THAT WE WOULD NEED THE ISSUE RESOLVED TODAY TO AVOID VOIDING OF THE PERMIT AND A CITATION TO THE CONTRACTOR. I RETURNED THE FILE TO LYLE.

PIERCE, KEVIN

10/19/2011 4:30 PM

PHONE CALL

INFORMATION RECORD

PHONE CALL FROM H.O. ASKING FOR STATUS. PERMIT STILL IN PLAN REVIEW. REFERRED HER THERE

PIERCE, KEVIN

8/25/2011

PHONE CALL

INFORMATION RECORD

SPOKE TO LYLE IN PLAN REVIEW. HE SENT THE NEEDED PAPERWORK VIA FAX. CONTRACTOR CALLED AND SAID HE DID NOT RECEIVE THEM. LYLE FAXED THEM AGAIN. HE IS WAITING FOR THE DOCUMENTS

PIERCE, KEVIN

8/19/2011 9:18 AM

PHONE CALL

INFORMATION RECORD

ON 8/18/11 AT 4:30 APPR. I SPOKE TO H.O. SHE WANTED AN UPDATE. I SPOKE TO LYLE WHO SAID THE ENGINEER WAS FEDEXING DOCUMENTS. SHE WANTED TO KNOW WHAT THE PROCEDURE WAS. I INFORMED HER THAT AN ENGINEER WAS GOING TO CERTIFY COVERED INSPECTIONS. SHE WANTED TO KNOW IF ANYONE FROM THE BD WAS GOING TO LOOK AT THE WORK. I SAID NO. SHE WANTED TO KNOW IF THE ENGINEER WOULD LOOK AT THE WORK. I SAID I DID NOT KNOW. SHE WAS CONCERNED THAT THE WORK WAS OKAY AND WANTED TO KNOW IF WE COULD LOOK AT THE WORK. I TOLD HER IF SHE WANTED TO OPEN THE WALL AND PHYSICALLY EXAMINE THE WORK, SHE COULD, BUT THAT SHE WOULD BE RESPONSIBLE FOR THAT. I TOLD HER THE BD WOULD NOT DO A DESTRUCTIVE INSPECTION.

PIERCE, KEVIN

8/16/2011 3:12 PM

PHONE CALL

INFORMATION RECORD

772-807-7696. 917-744-1583. SPOKE TO MARIA, H.O. SHE WANTED INFO. SHE CONFIRMS THAT THE WORK IS DONE AND MOM IS LIVING IN THE HOUSE SHE SAID SHE HAD DEALT WITH A DAVID MOY FROM THE COMPANY. I CALLED THE COMPANY. I SPOKE TO JOSEPH. HE SAID HE COULD NOT HELP ME. I TOLD HIM THAT I NEED TO SPEAK TO THE QUALIFIER. HE WAS NOT IN. I WILL CALL TOMORROW. SPOKE TO LYLE. HE SPOKE TO GILBERT AT SKYHIGH ON THE 11TH AND EXPLAINED WHAT WE NEEDED. WE WILL NEED AN ENGINEER OR ARCHITECT TO SIGN OFF ON THE PROJECT. IN ADDITION, I AM SAYING WE WILL NEED A DOUBLE FEE, AS THE WORK IS COMPLETE

BEDELL, RUSTY

8/15/2011

PHONE CALL

INFORMATION RECORD

OWNER CALLED (MARIEA GEAGOLLA) #917-744-1583. I TOLD HER KEVIN WILL RESEARCH THE CASE AND CALL HER BACK BY TOMORROW= 8-15-11

PAGE 18 OF 19

PIERCE, KEVIN 3:17 PM
7/21/2011
PHONE CALL
INFORMATION RECORD

LYLE CAME OVER TO ASK ABOUT PERMIT. I CALLED THE CONTRACTOR AND LEFT A MESSAGE REMINDING THEM OF THE ISSUES AND WARING THAT THE PERMIT COULD BE VOIDED. LEFT CONTACT INFO FOR BD

PHONE CALL
INFORMATION RECORD

BROCKWAY, MARK
12/10/2010
INFORMATION RECORD

PERMIT WAS PULLED FOR STRUCTURAL DAMAGE TODAY. APPARENT VEHICLE STRIKE. CLOSE CASE.

BROCKWAY, MARK
12/10/2010
PREMISE VISIT

REVISITED SITE. SOMEONE CONTINUES TO WORK ON FRONT PART OF HOUSE BUT NO ANSWER. ALL SIDING REMOVED NOW BETWEEN FRONT DOOR & GARAGE DOOR. LOOKS LIKE SOME SORT OF STRUCTURAL REPAIR OR POSSIBLE NEW WINDOW. LEFT ANOTHER CARD. NO-ONE HAS CALLED ME. ADD 2 NEW PICS TO CASE. PUT ON CARD IF WORK CONTINUES THEY WOULD NEED A ENGINEER TO VERIFY WORK TO CODE.

BROCKWAY, MARK
12/1/2010 10:00 AM
PREMISE VISIT

POSSIBLE NEW FRONT WINDOW W/NO PERMIT. LEFT DOOR HANGER. BLUE TARP & PLYWOOD OVER OPENING.

Complaint History

Case#	Status	Complainant	Investigator	Date	Problem Type	Date Complete
13334	PENDING	MB/KRP	PIERCE, KEVIN	12/1/2010	PERMIT INVESTIGATIONS	
14618	PENDING	PERMIT NOT APPROVED	PIERCE, KEVIN	10/28/2011	PERMIT INVESTIGATIONS	

PAGE 19 OF 19

Carol Heintz

From: RENE JAiMES [renejaimes@me.com]
Sent: Tuesday, August 21, 2012 2:54 PM
To: Carol Heintz
Cc: Robert Lewis
Subject: 1797 sw Monterey In

Dear Ms Hines,

Mr Clifford Russ is requesting an appeal on case number 13334 that happen on August 9,2012.He can be reached at 561-784-6900 or his attorney Robert Lewis at 561-355-5671.

Thank You

AUG 22 '12 AM 8:49

Karen Phillips

From: Nancy Brinson
Sent: Wednesday, August 29, 2012 12:42 PM
To: Karen Phillips
Subject: Phone Message

Karen,

Attorney Robert Lewis called in regards to notice of appeal for Mr. Clifford Russ, he said he e-mailed you on August 21, regarding this matter and asked that you call him back his phone number is (561) 355-5671

NANCY BRINSON, SECRETARY
CITY CLERK'S OFFICE
121 SW PORT ST. LUCIE BLVD.
PORT. ST. LUCIE, FL 34984
772-871-5157

2:30 P.M
8-29-12
KAP
Returned call - left message - waiting to
hear from Council Office re: hearing date.

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:

Clifford Russ
Skyhigh Siding & Roofing
901 Northpoint Pkwy
#204
West Palm Beach, FL 33407

2. Article Number
(Transfer from service label)

7012 1640 0000 3778 5782

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
 Addressee

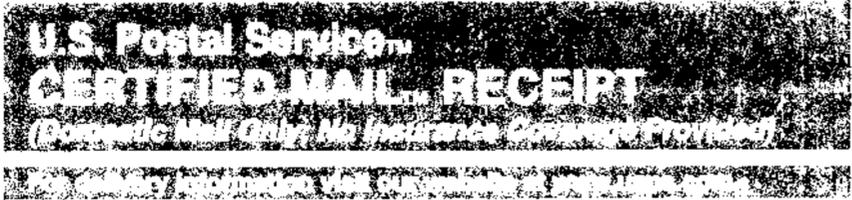
B. Received by (Printed Name) C. Date of Delivery

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

7012 1640 0000 3778 5782



*Clifford Russ Skyhigh Siding & Roofing
901 Northpoint Pkwy #204
West Palm Beach, FL 33407*



7012 1640 0000 3778 5782
7012 1640 0000 3778 5782

Sent to
Street, Apt. No. or PO Box No. City, State, ZIP+4
PS Form 3800, August 2006

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

Postmark Here

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

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:

Clifford Russ
Skyhigh Siding & Roofing
901 Northpoint Pkwy
#204
West Palm Beach, FL 33407

2. Article Number
(Transfer from service label)

7012 1640 0000 3778 5782

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *K. Bell* 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

*Clifford Russ Skyhigh Siding & Roofing #204
West Palm Beach*