



**The City of Fort Lauderdale Community Redevelopment Agency  
Northwest - Progresso - Flagler Heights  
Residential Facade and Landscaping Program Application & Agreement**

**INSTRUCTIONS:** You must be the property owner to complete this application. Only one (1) application per household will be processed. For more information or to request assistance in completing this application, please contact the Fort Lauderdale Community Redevelopment Agency at (954) 828-4508 or 8229.

Return to: The City of Fort Lauderdale Community Redevelopment Agency, 914 Sistrunk Boulevard, Suite 200, Fort Lauderdale, FL 33311.

Name: Joan Parchment

Property Address: 1427 N.W. 4<sup>th</sup> Street, Fort Lauderdale, FL 33311

Mailing Address (If different from above): \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: <sup>954</sup>(\_\_\_\_) 496-6612

E-Mail Address: wonderfulparchment@gmail.com

Type of Improvement Requested: Paint ☒ Landscape ☒

**I HEREIN CERTIFY, REPRESENT AND WARRANT THAT I AM THE SOLE PROPERTY OWNER OF THE ADDRESS ABOVE AND NO OTHER PARTY'S SIGNATURE IS REQUIRED TO APPROVE THE IMPROVEMENTS. I FURTHER CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

APPLICANT'S SIGNATURE: Joan Parchment DATE: 8/27/23

PRINT NAME: Joan Parchment

**RIGHT OF ENTRY AND LIABILITY WAIVER AGREEMENT**

This Agreement is by and between, Joan Parchment  
(the "Owner(s)") of the property commonly identified as:

1427 NW 4th Street

Folio No(s): 5042-04-06-2070

Fort Lauderdale, FL 33311

City/Town

Street (attach legal description if available) (referred to hereafter as the "Property")

And

Fort Lauderdale Community Redevelopment Agency, a community redevelopment agency organized pursuant to Chapter 163, Part III of the Florida Statutes ("NPFCRA").

**RECITALS**

Whereas, the NPFCRA was created in part to the improve the appearance of the Northwest, Progresso Flagler Heights Community Redevelopment Area ("CRA Area"); and

Whereas, the NPFCRA has created a program for exterior improvements for owners in the CRA Area, which may provide, at the discretion of the NPFCRA, up to \$5,000 for certain exterior improvements to existing homes.

**TERMS**

Now therefore, in consideration of one or more of the following activities to be conducted on the Property, the Owner(s) thereof hereby grants to NPFCRA a right of entry and access to the Property and a waives liability against NPFCRA, its employees, agents and public officials, for activities conducted under this Agreement in order to conduct one or more activities on the Property:

- ☒ (1) painting of the exterior, in accordance with the selection made by the Owner;  
☒ (2) landscaping, in accordance with the selections made by the Owner.

Owner may select a contractor from a list of approved contractors created by NPFCRA. Alternatively, Owner may select a qualified contractor of its own choosing. Before the NPFCRA will make any disbursements, the Owner must provide adequate and sufficient documentation that it has procured a minimum of three (3) bids from qualified contractors, and upon selecting one of the bids, Owner must provide a copy of the contract between the Owner and the Contractor, a copy of the contractor's license and proof of insurance and such other information as requested by the NPFCRA. The NPFCRA reserves the right to reject any contractor it deems unqualified in its sole discretion. Further, if a notice of commencement is required, the NPFCRA must be listed on the Notice as an additional party to receive notice to owner. The NPFCRA shall make one disbursement to the Owner when the work is completed and inspected by the NPFCRA. Notwithstanding, the NPFCRA reserves the right to issue a joint check payable to the Owner and the Contractor and to withhold payment to the Owner and issue a check directly to a subcontractor or lien or providing notice to owner to the NPFCRA. In some instances, the NPFCRA may require partial and/or final releases of liens in its sole discretion.

This right of entry and waiver of liability granted by the Owner(s) is a requirement in order to access the funds under the Residential and Landscaping Program (the "Program"), which was established by the Fort Lauderdale Community Redevelopment Agency Board of Commissioners. The purpose of the Program is to provide assistance to qualified home owners to landscape, paint the exterior of their homes and/or complete other improvements to the façade of their homes.

This right of entry and access to the Property is hereby granted by the Owner to the NPFCRA and its contractors and their subcontractors thereof, employees, and authorized agents, for the purpose of accomplishing the above purpose. The Owner agrees and warrants to hold harmless NPFCRA, its officers, agents, employees or assigns for damage of any type, whatsoever, either to the above described Property or to any persons present thereon and hereby releases, discharges and waives and releases NPFCRA from any action against NPFCRA, its officers, agents, employees, or assigns from all liability to Owner(s), Owner(s)'s children, relatives, guests, representatives, assigns, or heirs, for defects in the work product, bodily injury, death or property damage that Owner(s) may suffer in connection with any activities on the Property, whether caused solely or partially by the NPFCRA, its officers, agents, employees, or assigns.

I/we have read this Right of Entry and Liability Waiver Agreement, or it has been read to me/us, and I/we fully understand its terms, understand that I have given up substantial rights by signing it, am aware of its legal consequences, and have signed it freely and voluntarily without any inducement, assurance, or guarantee being made to me and intend for my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

After the improvements are completed, Owner agrees to maintain the improvements at his or her expenses. NPFCRA shall have no obligation to maintain the improvements. Further, NPFCRA shall have no liability for any defects in the quality of the work product.

Owner understands and acknowledges if it does not understand the legal consequence of signing this Agreement, it is encouraged to seek the advice and counsel of an attorney.

**WHEREOF**, the undersigned has caused this Right of Entry and Waiver of Liability Agreement to be executed on this 27 day of August, 2023

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the Parties hereto have made and executed this Agreement on the date first above written.

**Property Owner(s):**

Joan Parchment  
[Print Name]

\_\_\_\_\_  
[Print Name]

Joan Parchment  
[Signature]

\_\_\_\_\_  
[Signature]

**Witness:**

Jonelle Adderley  
[Signature]

Jonelle Adderley  
[Print Name]

**STATE OF FLORIDA  
COUNTY OF BROWARD**

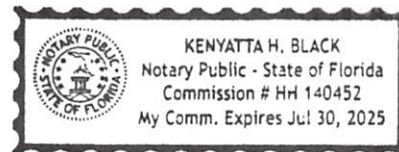
The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online, this 28<sup>th</sup> day of August, 2023, by Joan Parchment.

Kenyatta H. Black

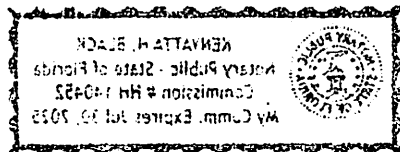
Notary Public, State of Florida

Kenyatta H. Black

Name of Notary Typed, Printed or Stamped



Personally Known \_\_\_\_\_ OR Produced Identification ✓  
Type of Identification Produced DL



AGENCY:

**FORT LAUDERDALE COMMUNITY  
REDEVELOPMENT AGENCY**, a body  
corporate and politic of the State of Florida  
created pursuant to Part III, Chapter 163

WITNESSES:

Amber Cabrera

[Witness type or print name]

[Signature]

[Witness type or print name]

By: [Signature]  
Greg Chavarria, Executive Director

ATTEST:

[Signature]  
David R. Soloman,  
CRA Secretary



Approved as to form and correctness:  
D' Wayne Spence, Interim General Counsel

[Signature]  
Lynn Solomon,  
Assistant General Counsel

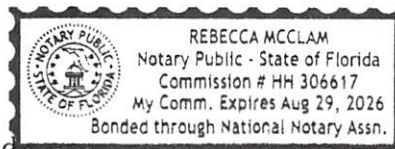
**STATE OF FLORIDA  
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me by means of ☒ physical presence or  
☐ online, this 13th day of September, 2023, by GREG CHAVARRIA, Executive Director  
of the Fort Lauderdale Community Redevelopment Agency, a body corporate and politic of  
the State of Florida created pursuant to Part III, Chapter 163.

[Signature]  
Notary Public, State of Florida

Rebecca McClam

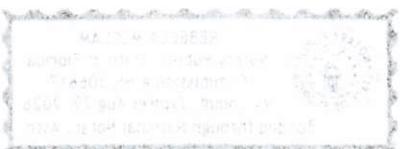
Name of Notary Typed, Printed or Stamped



Personally Known [checkmark] OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_



RECEIVED  
CITY OF FORT LAUDERDALE  
JAN 10 1961





## **Paint Color Selection Agreement**

**NOTE:** Please pick a Main (Body) Color, Trim Color and Accent Color from the color swatch.

Property Owner Name (Please print): Joan Parchment

Property Address (Please print): 1427 N.W. 4<sup>th</sup> Street, Fort Lauderdale

Main (Body) Color (Please print): \_\_\_\_\_

Trim Color (Please print): \_\_\_\_\_

Accent Color (Please print): \_\_\_\_\_

The undersigned property owner hereby agrees to the paint color selection described above. I understand that once the color selection is made, colors cannot be changed.

Joan Parchment

Property Owners Signature

8/27/23

Date

**Landscaping Design Selection Agreement**

Property Owner Name: Joan Parchment  
(Please print)

Property Address: 1427 N.W. 4<sup>th</sup> Street, Fort Lauderdale, FL 33311  
(Please print)

The undersigned property owner agrees to meet with the landscaper to discuss their individual design.

Joan Parchment  
Property Owner's Signature

8/27/23  
Date

**Property Maintenance Agreement**

Property Owner Name: Joan Parchment  
(Please print)

Property Address: 1427 N.W. 4<sup>th</sup> Street. Fort Lauderdale, FL 33311  
(Please print)

The undersigned property owner agrees to maintain the property improvements and landscaping.

Joan Parchment  
Property Owner's Signature

8/27/23  
Date

VOID IF ALTERED OR ERASED

RELATIONSHIP TO DECEDENT: WIFE

INFORMANT'S ADDRESS: 1427 NORTHWEST 4TH STREET, FORT LAUDERDALE, FLORIDA 33311, UNITED STATES

FUNERAL DIRECTOR/LICENSE NUMBER: AVIS BOYD-GAINES, F055312

FUNERAL FACILITY: JAMES C BOYD FUNERAL HOME - FORT LAUDERDALE F088222  
2324 SISTRUNK BLVD, FORT LAUDERDALE, FLORIDA 33311

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: EDENS CREAMTION SOCIETY LLC  
WEST PARK, FLORIDA

### CERTIFIER INFORMATION

TYPE OF CERTIFIER: CERTIFYING PHYSICIAN

TIME OF DEATH (24 HOUR): 1351

CERTIFIER'S NAME: MIKHAIL ZELFMAN, DO

CERTIFIER'S LICENSE NUMBER: OS9808

NAME OF ATTENDING PRACTITIONER (IF OTHER THAN CERTIFIER): NOT APPLICABLE

MEDICAL EXAMINER CASE NUMBER: NOT APPLICABLE

DATE CERTIFIED: APRIL 18, 2023

### CAUSE OF DEATH AND INJURY INFORMATION

MANNER OF DEATH: NATURAL

CAUSE OF DEATH - PART I - AND APPROXIMATE INTERVAL: ONSET TO DEATH

a. METASTATIC COLON ADENOCARCINOMA

b. LIVER METASTASIS

c. ATRIAL FIBRILLATION

d. HYPERTENSION

PART II - OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I:

AUTOPSY PERFORMED? NO

DATE OF SURGERY:

REASON FOR SURGERY:

PREGNANCY INFORMATION: NOT APPLICABLE

DATE OF INJURY: NOT APPLICABLE

LOCATION OF INJURY:

DESCRIBE HOW INJURY OCCURRED:

AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH?

DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN

TIME OF INJURY (24 HOUR):

INJURY AT WORK?

PLACE OF INJURY:

IF TRANSPORTATION INJURY, STATUS OF DECEDENT:

TYPE OF VEHICLE:

*Ken Jones*  
STATE REGISTRAR

REQ: 2025232200

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.

### WARNING:

THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT. THIS DOCUMENT WILL NOT PRODUCE A COLOR COPY.



\* 6 1 2 5 8 9 8 3 \*

DH FORM 1947 (08/01/2022)

CERTIFICATION OF VITAL RECORD



## PROPERTY SUMMARY

**Tax Year:** 2023  
**Property ID:** 504204062070  
**Property Owner(s):** PARCHMENT, JOAN  
**Mailing Address:** 1427 NW 4 ST FORT LAUDERDALE, FL 33311  
**Physical Address:** 1427 NW 4 STREET FORT LAUDERDALE, 33311

**Property Use:** 01-01 Single Family  
**Millage Code:** 0312  
**Adj. Bldg. S.F:** 903  
**Bldg Under Air S.F:** 924  
**Effective Year:** 1951  
**Year Built:** 1950  
**Units/Beds/Baths:** 1 / 2 / 1

**Deputy Appraiser:** Residential Department  
**Appraisers Number:** 954-357-6831  
**Email:** [realprop@bcpa.net](mailto:realprop@bcpa.net)  
**Zoning:** RS-8 - RESIDENTIAL SINGLE FAMILY/LOW MEDIUM DENSITY  
**Abbr. Legal Des.:** FIRST ADD TO TUSKEGEE PARK  
 9-65 B LOT 24 W 24 OF S 105,25 E 26 OFS 105  
 BLK 9

## PROPERTY ASSESSMENT

Year	Land	Building / Improvement	Agricultural Saving	Just / Market Value	Assessed / SOH Value	Tax
2023	\$15,750	\$119,700	0	\$135,450	\$38,500	
2022	\$15,750	\$97,390	0	\$113,140	\$37,380	\$808.59
2021	\$15,750	\$71,610	0	\$87,360	\$36,300	\$778.84

## EXEMPTIONS AND TAXING AUTHORITY INFORMATION

	County	School Board	Municipal	Independent
Just Value	\$135,450	\$135,450	\$135,450	\$135,450
Portability	0	0	0	0
Assessed / SOH 14	\$38,500	\$38,500	\$38,500	\$38,500
Granny Flat				
Homestead 100%	\$25,000	\$25,000	\$25,000	\$25,000
Add. Homestead	0	0	0	0
Wid/Vet/Dis	0	0	0	0
Senior	0	0	0	0
Exemption Type	0	0	0	0
Affordable Housing	0	0	0	0
Taxable	\$13,500	\$13,500	\$13,500	\$13,500

## SALES HISTORY FOR THIS PARCEL

Date	Type	Price	Book/Page or Cin	Unit Price	Units	Type
09/09/2011	Warranty Deed	\$35,000	48178 / 185	\$3.00	5,250 SqFt	Square Foot
	Disqualified Sale					
07/16/2011	Warranty Deed	\$100	48178 / 183			
	Non-Sale Title Change					
04/12/2011	Certificate of Title	\$35,100	47911 / 816			
	Disqualified Sale					
01/08/2009	Warranty Deed	\$180,000	45964 / 1649			
	Qualified Sale					
12/29/2008	Rerecorded Deed Correction		45887 / 1477			

## RECENT SALES IN THIS SUBDIVISION

Property ID	Date	Type	Qualified/ Disqualified	Price	CIN	Property Address
504204061300	05/24/2023	Warranty Deed	Qualified Sale	\$409,000	118883263	411 NW 12 AVE FORT LAUDERDALE, FL 33311
504204062020	04/28/2023	Warranty Deed	Qualified Sale	\$379,800	118862520	415 NW 14 TER FORT LAUDERDALE, FL 33311
504204061880	04/17/2023	Warranty Deed	Qualified Sale	\$280,000	118803829	420 NW 14 TER FORT LAUDERDALE, FL 33311
504204061830	04/03/2023	Warranty Deed	Qualified Sale	\$278,000	118785545	417 NW 14 AVE FORT LAUDERDALE, FL 33311
504204062190	02/08/2023	Quit Claim Deed	Disqualified Sale	\$435,000	118670193	436 NW 14 WAY FORT LAUDERDALE, FL 33311

## SPECIAL ASSESSMENTS

Fire	Garb	Light	Drain	Impr	Safe	Storm	Clean	Misc	SCHOOL
Ft Lauderdale Fire-rescue (03)						(F1)			Walker Elementary: D
Residential (R)									Sunrise Middle: C
1						1.00			Fort Lauderdale High: A

## ELECTED OFFICIALS

Property Appraiser	County Comm. District	County Comm. Name	US House Rep. District	US House Rep. Name
Marty Kiar	8	Robert McKinzie	20	Sheila Cherfilus-McCormick
Florida House Rep. District	Florida House Rep. Name	Florida Senator District	Florida Senator Name	School Board Member
99	Daryl Campbell	32	Rosalind Osgood	Dr. Jeff Holness

Prepared By and Return To:  
Arnold Straus, Jr., Esquire  
ENTERPRISE TITLE, INC.  
10081 Pines Boulevard, Suite C  
Pembroke Pines, Florida 33024  
Telephone: (954) 431-2000  
File Number: 11-5088B

## WARRANTY DEED

✓ THIS INDENTURE, made this 9 day of September, 2011, between MILTON KLOMPUS, a single man, as "GRANTOR", and JOAN ROLLE, a married woman, whose mailing address is 1427 NW 4th Street, Ft. Lauderdale, FL 33311, as "GRANTEE"

(\* "Grantor" and "Grantee" are used for singular or plural, as context requires.)

WITNESSETH that said Grantor, for and in consideration of the sum of \$35,000.00 and other good and valuable consideration in hand paid to Grantor by said Grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said Grantee, and Grantee's heirs and assigns forever, the following described land, situate, lying and being in Broward County, Florida, to wit:

**The South 105 feet of the West 24 feet of Lot 24 and the South 105 feet of the East 26 feet of Lot 25, Block 9, First Addition to Tuskegee Park, according to the Plat thereof, as recorded in Plat Book 9, at Page 65, of the Public Records of Broward County, Florida.**

(Tax Folio No.: 504204-06-2070)

SUBJECT TO:

- 1 Taxes for the year 2011 and all subsequent years.
- 2 Restrictions, easements, limitations and zoning ordinances of record.

and said Grantor does hereby fully warrant the title to the said land, and will defend same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the GRANTOR has caused this Warranty Deed to be executed the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness #1 Signature

Witness #1 Printed Name

Witness #2 Signature

Witness #2 Printed Name

Lizette Kirschbaum  
Lizette Kirschbaum  
Suzanne Dunford  
Suzanne Dunford

Milton Klopbus (Seal)

GRANTOR'S SIGNATURE

MILTON KLOMPUS

GRANTOR'S NAME - PLEASE PRINT

1461 E La Costa Drive

MAILING ADDRESS

Pembroke Pines, FL 33027

CITY

STATE

ZIP

STATE OF FLORIDA, Broward County ss:

The foregoing instrument was acknowledged before me this 9 day of **September**, 2011, by **MILTON KLOMPUS, a single man**, who [ ] is, personally known to me [ ] has produced his/her Driver's License ☒ has produced \_\_\_\_\_ as identification.

Suzanne Dunford  
Notary Signature

My Commission Expires:

**Suzanne Dunford**

Printed Notary Signature

SEAL

NOTARY PUBLIC-STATE OF FLORIDA  
Suzanne Dunford  
Commission # DD708436  
Expires: SEP. 28, 2011  
BONDED THRU ATLANTIC BONDING CO., INC.



✓

**Florida** **DRIVER LICENSE** USA CLASS E

1 **P625-487-64-708-0** 2 **PARCHMENT** 3 **JOAN GALE** 4 **FT LAUDERDALE FL 33311-8855**

5 **DOB 06/08/1964** 6 **SEX F** 7 **EXP 06/03/2029** 8 **HGT 5-05"** 9 **REST NONE** 10 **END NONE**

11 **SAFE DRIVER** 12 **US 05/10/2021** 13 **5DD Q132165215394**

14 *[Signature]* 15 **Operation of a motor vehicle constitutes consent to any sobriety test required by law**

A Florida Driver License card for Joan Gale. The card is white with a blue border. It features a large photo of Joan Gale on the left, a signature on the right, and a small circular emblem at the top right. The text is printed in a sans-serif font, with some fields in bold. The card includes personal information, a license number, and a statement about the consent to a sobriety test.



## DOCUMENT ROUTING FORM

Rev: 3 | Revision Date: 9/1/2022

TODAY'S DATE: August 29, 2023

DOCUMENT TITLE: Residential Facade and Landscaping Program Agreement- Joan Parchment

COMM. MTG. DATE: 12/7/21 CAM #: 21-1146 ITEM #: RZ CAM attached: ☐ YES ☐ NORouting Origin: Jonelle Adderley Router Name/Ext: 4508 Action Summary attached: ☐ YES ☐ NOCIP FUNDED: ☐ YES ☐ NO

Capital Investment / Community Improvement Projects defined as having a life of at least 10 years and a cost of at least \$50,000 and shall mean improvements to real property (land, buildings, or fixtures) that add value and/or extend useful life, including major repairs such as roof replacement, etc. Term "Real Property" include land, real estate, realty, or real.

2) City Attorney's Office: Documents to be signed/routed? ☐ YES ☐ NO # of originals attached: 1Is attached Granicus document Final? ☐ YES ☐ NO Approved as to Form: ☐ YES ☐ NO

Date to CCO: 9-11-23 Attorney's Name: Lynn Solomon Initials: [Signature]

3) City Clerk's Office: # of originals: 1 Routed to: Ext: Date: 09/11/23

4) City Manager's Office: CMO LOG #: SEP 27 Document received from: CCO 9/13/23

Assigned to: GREG CHAVARRIA ☒ ANTHONY FAJARDO ☐ SUSAN GRANT ☐  
GREG CHAVARRIA as CRA Executive Director ☐☐ APPROVED FOR G. CHAVARRIA'S SIGNATURE ☐ N/A G. CHAVARRIA TO SIGN

PER ACM: A. FAJARDO (Initial) S. GRANT (Initial)

☐ PENDING APPROVAL (See comments below)

Comments/Questions: [Signature]

Forward ☒ originals to ☐ Mayor ☒ CCO Date: 9/13/23

5) Mayor/CRA Chairman: Please sign as indicated.

Forward \_\_\_\_\_ originals to CCO for attestation/City seal (as applicable) Date: \_\_\_\_\_

## INSTRUCTIONS TO CITY CLERK'S OFFICE

City Clerk: Retains \_\_\_\_\_ original and forwards \_\_\_\_\_ originals to: Jonelle Adderley (Name/Dept/Ext) Ext-4508

Attach \_\_\_\_\_ certified Reso # \_\_\_\_\_ ☐ YES ☐ NO Original Route form to CAO