



City of Ocala
Growth Management Department
201 S.E. 3rd Street, 2nd Floor
352-629-8421 | www.ocalafl.org

email:
bmiller@
OcalaFl.
gov

Case File # _____
COA _____
Meeting Date: _____
Product Approval # _____

Application for a Certificate of Appropriateness (COA)

As required by Section 94-82(g) of the City of Ocala Code of Ordinances, Ocala Historic Preservation Advisory Board (OHPAB) decisions on the COAs will be based on the Secretary of the Interior's Standards for Rehabilitation and Guidelines for Rehabilitating Historic Buildings the Ocala Historic Preservation Design Guidelines, and the Ocala Historic Preservation Code.

COA Application Procedure:

1. Arrange an informal pre-application conference with Planning staff.
2. Fill out and submit COA application and required material to Planning staff 30 days prior to OHPAB meeting. Please email application packets: historic@ocalafl.org.
3. Attend OHPAB meeting or send a representative with a letter of authorization.
4. Meetings are held the 1st Thursday of each month at 4:00 p.m.
5. Meeting Location: City Council Chambers, 2nd floor of City Hall (110 SE Watula Ave.)

If applicant fails to notify staff and does not attend the meeting, the application may be tabled for one month. If applicant fails to notify staff and does not attend the next monthly meeting, the application may be denied without prejudice.

There is no application fee; however, if work is performed without an approved COA, a fee of \$100 will be assessed.

Parcel #:		Property Address:	514 SE Sanchez Ave Ocala FL 34471
Owner:	David and Kim Gibas	Owner Address:	Same
Owner Phone #:	352-497-1723	Owner Email:	kinggibas@gmail.com
Will there be an additional meeting representative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, representative will need a letter of authorization*)			
If yes, name of representative:			
Rep. Phone #:		Rep. Email:	

Project Type:	<input type="checkbox"/> Addition	<input type="checkbox"/> New Construction	<input type="checkbox"/> Site Work
	<input type="checkbox"/> Alteration	<input type="checkbox"/> Reroof	<input type="checkbox"/> Fence
	<input type="checkbox"/> Repair	<input type="checkbox"/> Relocation	<input checked="" type="checkbox"/> Other <u>COA for</u>

old improvements
(completed)



dm 6.00
70
100 ind.

Corrective Quit Claim Deed

7th This Corrective Quit Claim Deed, executed this day of January, 2002, by **Kim G. Gibas, f/k/a Kim Gardner, joined by her husband, David J. Gibas**, party of the first part, whose post office address is 514 SE Sanchez Avenue, Ocala, Florida 34471, ("Grantor") to **David J. Gibas and Kim G. Gibas, husband and wife**, whose post office address is 514 SE Sanchez Avenue, Ocala, FL 34471, party of the second part ("Grantee").

(Wherever used herein the terms "Grantor" and "Grantee" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH

That Grantors, Kim G. Gibas, f/k/a Kim Gardner, joined by her husband, David J. Gibas, for and in consideration of the sum of **Ten & No/100 Dollars (\$10.00)** and other good and valuable consideration, the receipt and adequacy whereof is hereby acknowledged, has quit claimed, granted, bargained and sold unto the grantee forever, all the right, title, interest, claim and demand which Grantor has in and to the following described real property lying and being in County of Marion, State of Florida, to wit:

SE 1/4 of Lot 22, EXCEPT South 1/2 of CALDWELLS ADDITION OF OCALA, as per plat thereof recorded in Plat Book E, Page 48, public records of Marion County, Florida.

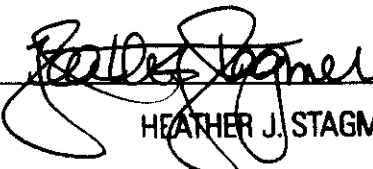
This Corrective Quit Claim Deed is being given to correct the Legal Description contained in that certain Quit Claim Deed recorded in Official Records Book 3066, Page 0329, public records of Marion County, Florida.

To Have and to Hold the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of Grantor, either in law or equity.

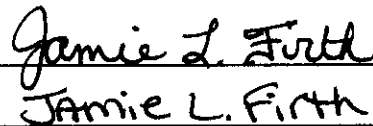
SUBJECT TO Covenants, restrictions, easements of record and taxes for the current year.

IN WITNESS WHEREOF, WE, Kim G. Gibas, f/k/a Kim Gardner and David J. Gibas have hereunto set our hands and official seals the day and year first above written.

Signed, sealed and delivered in the presence of:


HEATHER J. STAGMER

Please print full name


Jamie L. Firth

Please print full name

STATE OF FLORIDA
COUNTY OF MARION

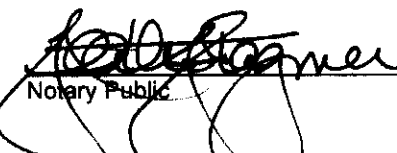
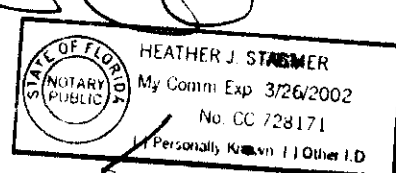
I HEREBY CERTIFY that on this 7th day of January, 2002, before me, an officer duly authorized aforesaid to take acknowledgments, personally appeared Kim G. Gibas, f/k/a Kim Gardner, joined by her husband, David J. Gibas, to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same for the purposes therein contained and that they are personally known to me or have produced _____ as identification.

WITNESS my hand and official seal in State and County aforesaid, this 7th day of January, 2002.

This instrument prepared by and return to:
Daniel Hicks, Esquire
DANIEL HICKS, P.A.
421 South Pine Avenue
Ocala, Florida 34474
Florida Bar #0145139
Phone: (352) 351-3353
File No. 2001-267DH

DAVID R ELLSPERMANN
CLERK OF MARION COUNTY
BK 03088 PG 0833
FILE NUM 2002003037

RECORDED 01/10/2002 09:13:18 AM
DEED DOC TAX 0.70
RECORDING FEES 6.00
RECORDED BY D Collier *OCOWIS*


Notary Public

Personally Known ☒ Other ☐