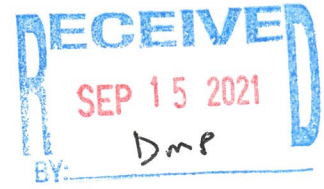


# **Application**



# Application for Easement

City of Key West, Florida • Planning Department  
1300 White Street • Key West, Florida 33040 • 305-809-3764 • www.cityofkeywest-fl.gov



**Application Fee: \$2,400.00**

(includes \$200.00 advertising/noticing fee and \$100.00 fire review fee)  
(\$500.00 for each additional easement for same parcel)

Please complete this application and attach all required documents. This will help staff process your request quickly and obtain necessary information without delay. If you have any questions, please call 305-809-3764.

### PROPERTY DESCRIPTION:

Site Address: 911 Center St, KW FL, 33040  
Zoning District: HNC-1 Real Estate (RE) #: 00017490-000000  
Property located within the Historic District?  Yes  No

APPLICANT:  Owner  Authorized Representative

Name: Eric & Diane Buckbee  
Mailing 223 Rocky Hill Rd. Address:  
City: Plymouth State: MA Zip: 02360  
Home/Mobile Phone: 617.835.6007 Office: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: bbuckbeeone@gmail.com

### PROPERTY OWNER: (if different than above)

Name: \_\_\_\_\_  
Mailing \_\_\_\_\_ Address:  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home/Mobile Phone: \_\_\_\_\_ Office: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Description of requested easement and use: We need to replace the front picket fence and the side gates. we also want to replace the oversized coconut palms in the front with Key Thatch palms.

After submittal for the permits we have learned that the current fence, garden and coconut palms are on City property. Our request is a variance to replace the old fence with new, cut the coconut palms and replace with Key Thatch palms.

Are there any easements, deed restrictions or other encumbrances attached to the property?  Yes  No

If yes, please describe and attach relevant documents: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SUBMITTALS:** All of the materials listed below must be submitted in order to have a complete application. Applications will not be processed until all materials are provided. Please submit one (1) paper copy of the materials to the Planning Department along with one (1) electronic copy of materials on a flash drive.

Correct application fee. Check may be payable to "City of Key West."

Notarized verification form signed by property owner or the authorized representative.

Notarized <sup>N/A</sup> authorization form signed by property owner, if applicant is not the owner.

Copy of recorded warranty deed

Monroe County Property record card

Signed and sealed Specific Purpose Survey with the legal description of the easement area requested and naming the property owner and/or entity on the document along with City of Key West.

Photographs showing the proposed area

Certificate of Liability Insurance, with the City of Key West listed as additional Certificate Holder. If certificate is not provided at time the application was accepted, the certificate shall be provided to the Planner within 7 days after the application is placed on a Development Review Committee (DRC) Agenda.

*on its way*

**Bruce E. Buckbee**  
**223 Rocky Hill Road**  
**Plymouth, MA 02364**  
**617.835.6007**  
**bbuckbeeone@gmail.com**

September 15, 2021

City of Key West  
1300 White St  
Key West, FL. 33040  
Attn: Planning Dept.

*RE: Fence Easement at 911 Center St. KW*

Dear Sirs,

Attached please find the easement application and other related materials to replace our rotted fence and gates at our property at 911 Center St and replace the coconut palms.

We are requesting a variance and building permit to replace rotting fence and gates with same;

- Picket fence- 3' height, ~35' length
- Left side gate and fence- 6' height, 7' length
- Right side gate- 6' height, 3' width
- Construction material- pressure-treated lumber
- Color- white
- Replace coconut palms with native Key Thatch Palms

911 Center St is not a commercial property, it is our vacation home. We rent it monthly when we are not in KW. It is held in an LLC for liability insurance purposes only.

Thank you for your consideration. Please call or email me if you have any questions.

Sincerely,


Bruce E. Buckbee

Diane D. Buckbee

Homeowners







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/16/2022

**PRODUCER**  
Key West Insurance  
646 United St.  
Key West, FL 33040

**INSURED**  
911 Center St. LLC  
Bruce Buckbee 911  
Center St.  
Key West, FL 33040

THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

| INSURERS AFFORDING COVERAGE     | NAIC # |
|---------------------------------|--------|
| INSURER A: Seacoast Brokers LLC |        |
| INSURER B:                      |        |
| INSURER C:                      |        |
| INSURER D:                      |        |
| INSURER E:                      |        |

### COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR/ADD'L<br>LTR/INSRD | TYPE OF INSURANCE   | POLICY NUMBER   | POLICY EFFECTIVE<br>DATE (MM/DD/YY) | POLICY EXPIRATION<br>DATE (MM/DD/YY) | LIMITS   |
|-------------------------|---|-----------------|-------------------------------------|--------------------------------------|--|
|                         | <b>GENERAL LIABILITY</b><br><input type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC. |                 |                                     |                                      | EACH OCCURRENCE \$<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$<br>MED EXP (Any one person) \$<br>PERSONAL & ADV INJURY \$<br>GENERAL AGGREGATE \$<br>PRODUCTS - COMP/OP AGG \$<br>\$ |
|                         | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> OTHER RENTED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS   |                 |                                     |                                      | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |
|                         | <b>GARAGE LIABILITY</b><br><input type="checkbox"/> ANY AUTO  |                 |                                     |                                      | AUTO ONLY - EA ACCIDENT \$<br>OTHER THAN EA ACC \$<br>AUTO ONLY: AGG \$  |
|                         | <b>EXCESS/UMBRELLA LIABILITY</b><br><input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE<br>DEDUCTIBLE<br>RETENTION \$   |                 |                                     |                                      | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$<br>\$<br>\$   |
|                         | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N/A<br>If yes, describe under SPECIAL PROVISIONS below  |                 |                                     |                                      | WC STATUTORY LIMITS OTHER<br>E.L. EACH ACCIDENT \$<br>E.L. DISEASE - EA EMPLOYEE \$<br>E.L. DISEASE - POLICY LIMIT \$  |
|                         | Personal Liability  | NF0333FL0203722 | 07/31/2021                          | 07/31/2022                           | \$485,000 Coverage A<br>\$97,000 Coverage B<br>\$1,000,000 Personal Liability  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

| CERTIFICATE HOLDER                                       | CANCELLATION  |
|--|---|
| City of Key West<br>1300 White St.<br>Key West, FL 33040 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.<br><i>Brian Stanton</i><br>AUTHORIZED REPRESENTATIVE |



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/15/2021

|  |  |               |
|--|--|---------------|
| <b>PRODUCER</b><br><br>Key West Insurance<br>646 United St.<br>Key West, FL 33040                          | <b>THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.</b> |               |
|  | <b>INSURERS AFFORDING COVERAGE</b>   | <b>NAIC #</b> |
| <b>INSURED</b><br><br>911 Center Street, LLC<br>Bruce Buckbee<br>223 Rocky Hill Rd.<br>Plymouth, MA. 02360 | INSURER A: Seacoast Brokers LLC  |               |
|  | INSURER B:   |               |
|  | INSURER C:   |               |
|  | INSURER D:   |               |
|  | INSURER E:   |               |

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR/ADD'L LTR/INSRD        | TYPE OF INSURANCE   | POLICY NUMBER   | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS   |                     |       |                    |    |                            |    |                             |    |
|-----------------------------|---|-----------------|----------------------------------|-----------------------------------|--|---------------------|-------|--------------------|----|----------------------------|----|-----------------------------|----|
|                             | <b>GENERAL LIABILITY</b><br><input type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR<br>_____<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |                 |                                  |                                   | EACH OCCURRENCE \$<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$<br>MED EXP (Any one person) \$<br>PERSONAL & ADV INJURY \$<br>GENERAL AGGREGATE \$<br>PRODUCTS - COMP/OP AGG \$<br>_____ \$   |                     |       |                    |    |                            |    |                             |    |
|                             | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS<br>_____   |                 |                                  |                                   | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |                     |       |                    |    |                            |    |                             |    |
|                             | <b>GARAGE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br>_____   |                 |                                  |                                   | AUTO ONLY - EA ACCIDENT \$<br>OTHER THAN EA ACC \$<br>AUTO ONLY: AGG \$  |                     |       |                    |    |                            |    |                             |    |
|                             | <b>EXCESS/UMBRELLA LIABILITY</b><br><input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE<br>_____<br><input type="checkbox"/> DEDUCTIBLE<br><input type="checkbox"/> RETENTION \$  |                 |                                  |                                   | EACH OCCURRENCE \$<br>AGGREGATE \$<br>_____ \$<br>_____ \$   |                     |       |                    |    |                            |    |                             |    |
|                             | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N/A<br>If yes, describe under SPECIAL PROVISIONS below  |                 |                                  |                                   | <table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table> | WC STATUTORY LIMITS | OTHER | E.L. EACH ACCIDENT | \$ | E.L. DISEASE - EA EMPLOYEE | \$ | E.L. DISEASE - POLICY LIMIT | \$ |
| WC STATUTORY LIMITS         | OTHER   |                 |                                  |                                   |  |                     |       |                    |    |                            |    |                             |    |
| E.L. EACH ACCIDENT          | \$  |                 |                                  |                                   |  |                     |       |                    |    |                            |    |                             |    |
| E.L. DISEASE - EA EMPLOYEE  | \$  |                 |                                  |                                   |  |                     |       |                    |    |                            |    |                             |    |
| E.L. DISEASE - POLICY LIMIT | \$  |                 |                                  |                                   |  |                     |       |                    |    |                            |    |                             |    |
|                             | <b>OTHER</b><br>Dwelling Fire Protection  | NF0333FL0203722 | 07/31/2021                       | 07/31/2022                        | \$485,000 Coverage A<br>\$97,000 Coverage B<br>\$1,000,000 Personal Liability  |                     |       |                    |    |                            |    |                             |    |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

## CERTIFICATE HOLDER

 City of Key West  
 1300 White St.  
 Key West, FL 33040

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL \_\_\_\_\_ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

 AUTHORIZED REPRESENTATIVE *Brian Stanton*



## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

# **Verification Form**

City of Key West  
Planning Department



Verification Form

Diane D Buckbee (Where Owner is the applicant)

I, Bruce B. Buckbee (911 Center St. LLC), being duly sworn, depose and say that I am the Owner (as appears on the deed), for the following property identified as the subject matter of this application:

911 Center St. Key West, FL. 33040  
Street address of subject property

I, the undersigned, declare under penalty of perjury under the laws of the State of Florida that the information on all plans, drawings and sketches attached hereto and all the statements and answers contained herein are in all respects true and correct.

In the event the City or the Planning Department relies on any representation herein which proves to be untrue or incorrect, any action or approval based on said representation shall be subject to revocation.

Bruce B. Buckbee  
Bruce B. Buckbee  
Signature of Owner

Subscribed and sworn to (or affirmed) before me on this May 28, 2021 by  
Bruce Buckbee and Diane D Buckbee ✓  
Name of Owner

He/She is personally known to me or has presented MA. Driver's license as identification.

Katie McPhee  
Notary's Signature and Seal

Katie McPhee  
Name of Acknowledger typed, printed or stamped

\_\_\_\_\_  
Commission Number, if any



**Deed**

Doc# 1818991 01/04/2011 8:33AM  
Filed & Recorded in Official Records of  
MONROE COUNTY DANNY L. KOLHAGE

This instrument was prepared by  
and return to:

Mitchell J. Cook  
Mitchell J. Cook, P.A.  
24171 Overseas Highway - Suite 2  
Summerland Key, Florida 33042

Property Appraiser's  
Parcel Identification: 00017490-000000  
Alternate Key: 1017965

01/04/2011 8:33AM  
DEED DOC STAMP CL: MARGO \$0.70

Doc# 1818991  
Bk# 2499 Pg# 283

## QUITCLAIM DEED

(Wherever used herein, the term "Grantor" and "Grantee" shall include the heirs, personal representatives and/or assigns of the respective parties hereto; the use of the singular number shall include the plural and the plural the singular; and the use of any gender shall include all genders).

**THIS INDENTURE**, made this 24 day of December, 2010, between **DOYLE - BUCKBEE, L.L.C.**, (hereinafter "Grantor"), whose post office address is 223 Rocky Hill Road, Plymouth, Massachusetts 02360-5517, and **911 CENTER STREET LLC**, a Massachusetts Limited Liability Company (hereinafter "Grantee") whose post office address is 223 Rocky Hill Road, Plymouth, Massachusetts 02360-5517.

**WITNESSETH** that said Grantor, for and in consideration of the sum of **TEN DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION** to said Grantor in hand paid by said Grantee, the receipt and sufficiency whereof is hereby acknowledged, has remised, released, and quitclaimed, and by these presents does remise, release and quitclaim unto said Grantee forever all the right, title, interest, claim and demand which said Grantor has in and to the following described land, situated, lying and being in the County of Monroe, State of Florida, to-wit:

On the Island of Key West and is part of Tract 4 according to William A. Whitehead's Map of plan of said island, delineated in February, 1829 but now better known as part of Subdivision 11 of Lot 1 in said Tract 4 according to S. M. Baldwin's Subdivision of Lots 1 and 3 of Square 8 of Simonton and Walls Addition; Commencing at a point on Center Street, a distance of 126 feet and 5 ½ inches from the corner of Olivia and Center Streets and running thence in a Southeasterly direction along the line of said Center Street a distance of 26 feet, 5 ½ inches; thence at right angles in a Northeasterly direction 84 feet; thence at right angles in a Northwesterly direction 26 feet, 5 ½ inches; thence at right angles in a Southwesterly direction 84 feet back to the point of beginning on Center Street.

Subject to easements, restrictions, reservations and limitations of record, if any.

**TOGETHER** with all the tenements, hereditaments and appurtenances thereto belonging or in any wise appertaining.

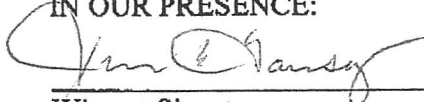
The property also being known as 911 Center Street, Key West, Florida 33040.

**TO HAVE AND TO HOLD** the same, together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all estate, right, title, interest, lien equity, and claim whatsoever of said Grantor, either in law or equity, to the only proper use, benefit and behoof of said Grantee forever.

**THIS QUITCLAIM DEED WAS PREPARED WITHOUT BENEFIT OF TITLE SEARCH, ABSTRACT EXAMINATION, OR SURVEY, AND IS BASED SOLELY UPON INFORMATION PROVIDED BY THE GRANTOR AND/OR GRANTEE.**

**IN WITNESS WHEREOF**, the said Grantor has signed and sealed these presents the day and year first above written.

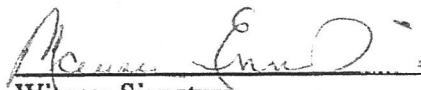
SIGNED, SEALED AND DELIVERED  
IN OUR PRESENCE:

  
\_\_\_\_\_  
Witness Signature

Susan E Tansay  
\_\_\_\_\_  
Name of Witness Printed

  
\_\_\_\_\_  
Witness Signature

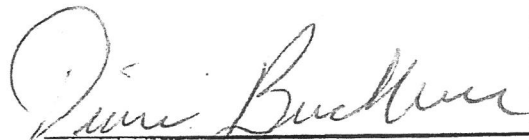
RONI BOSSE  
\_\_\_\_\_  
Name of Witness Printed


  
\_\_\_\_\_  
Witness Signature

MAUREEN ENNIS  
\_\_\_\_\_  
Name of Witness Printed

  
\_\_\_\_\_  
Witness Signature

Rosemary Jensen  
\_\_\_\_\_  
Name of Witness Printed

  
\_\_\_\_\_  
DIANE BUCKBEE, Managing Member  
of Grantor, Doyle - Buckbee, L.L.C.

  
\_\_\_\_\_  
BRUCE BUCKBEE, Member of Grantor,  
Doyle - Buckbee, L.L.C.

STATE OF MASSACHUSETTS )  
 ) ss:  
COUNTY OF ESSEX Plymouth )

The foregoing instrument was acknowledged before me this 24 day of December, 2010, by DIANE BUCKBEE, who is the Managing Member of Doyle - Buckbee, L.L.C., and is ( ) personally known to me or ( ) who has produced MA Drivers License as identification, and who did/did not take an oath.

SEAL



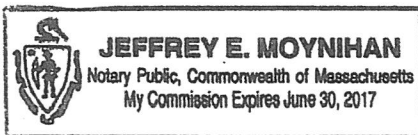
Jeffrey Moynihan  
(Signature of Notary)

Jeffrey Moynihan  
(Printed/Typed Name of Notary)

STATE OF MASSACHUSETTS )  
 ) ss:  
COUNTY OF ESSEX Plymouth )

The foregoing instrument was acknowledged before me this 23 day of December, 2010, by BRUCE BUCKBEE, who is a Member of Doyle - Buckbee, L.L.C., and is ( ) personally known to me or ( ) who has produced MA Drivers License as identification, and who did/did not take an oath.

SEAL



Jeffrey Moynihan  
(Signature of Notary)

Jeffrey Moynihan  
(Printed/Typed Name of Notary)

MONROE COUNTY  
OFFICIAL RECORDS

Prepared By and Return To:  
Chicago Title of the Florida Keys, Inc.  
801 Eisenhower Drive  
Key West, Florida 33040

\$3,517.50

08/05/2008 10:42AM  
DEED DOC STAMP CL: RS

\$3,517.50

File No. 1498-410880156

Property Appraiser's Parcel I.D. (folio) Number(s)  
00017490-000000

Doc# 1706718  
Bk# 2374 P# 1803

WARRANTY DEED

THIS WARRANTY DEED dated August 1, 2008, by Gregory S. Shanle and Christine Mae Shanle, husband and wife, hereinafter called the grantor, to Doyle - Buckbee, L.L.C., whose post office address is 427 Main Street, Lynfield, MA 01940, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

WITNESSETH: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys, and confirms unto the grantee, all the certain land situated in Monroe County, Florida, to wit:

On the Island of Key West and is part of Tract 4 according to William A. Whitehead's Map of plan of said Island, delineated in February, 1829 but now better known as part of Subdivision 11 of Lot 1 in said Tract 4 according to S. M. Baldwin's Subdivision of Lots 1 and 3 of Square 8 of Simonton and Walls Addition; Commencing at a point on Center Street, a distance of 125 feet and 5 1/2 inches from the corner of Olivia and Center Streets and running thence in a Southeasterly direction along the line of said Center Street a distance of 26 feet, 5 1/2 inches; thence at right angles in a Northeasterly direction 84 feet; thence at right angles in a Northwesterly direction 26 feet, 5 1/2 inches; thence at right angles in a Southwesterly direction 84 feet back to the point of beginning on Center Street.

Subject to easements, restrictions, reservations and limitations of record, if any.

TOGETHER with all the tenements, hereditaments and appurtenances thereto belonging or in any wise appertaining.

TO HAVE AND TO HOLD the same in Fee Simple forever.

AND the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2007.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in the presence of:

Monica Hornyak  
(Witness Signature)

MONICA HORNAYAK  
(Print Name of Witness)

Teri Dale  
(Witness Signature)

Teri Dale  
(Print Name of Witness)

Gregory S. Shanle  
Gregory S. Shanle

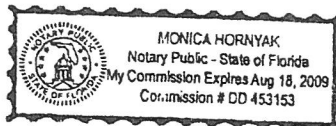
Christine Mae Shanle  
Christine Mae Shanle

Address:  
2113 Fogarty Avenue  
Key West, FL 33040

State of Florida  
County of Monroe

Sworn to and subscribed before me this 1 day of August, 2008 by Gregory S. Shanle and Christine May Shanle, who is personally known to me or who has produced FL Drivers License as identification.

Monica Hornyak  
Printed Name:  
Notary Public  
My commission expires:





# **Property Record Card**

**Disclaimer**

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the data is intended for ad valorem tax purposes only and should not be relied on for any other purpose.

By continuing into this site you assert that you have read and agree to the above statement.

**Summary**

Parcel ID 00017490-000000  
 Account# 1017965  
 Property ID 1017965  
 Millage Group 10KW  
 Location 911 CENTER St, KEY WEST  
 Address  
 Legal KW PT LT 1SQR 8 TR 4 B1-37 G52-216/17 OR681-371/72 OR714-820/21 OR717-608  
 Description OR846-50 OR846-45/46 OR846-52/53 OR994-1223 OR1436-546 OR1486-2142/44 OR1870-369/70 OR2374-1803 OR2499-283/85  
 (Note: Not to be used on legal documents.)  
 Neighborhood 6108  
 Property Class SINGLE FAMILY RESID (0100)  
 Subdivision  
 Sec/Twp/Rng 06/68/25  
 Affordable No  
 Housing



**Owner**

911 CENTER STREET LLC  
 223 Rocky Hill Rd  
 Plymouth MA 02360

**Valuation**

|                            | 2021      | 2020      | 2019      | 2018      |
|----------------------------|-----------|-----------|-----------|-----------|
| + Market Improvement Value | \$135,326 | \$137,206 | \$139,085 | \$142,844 |
| + Market Misc Value        | \$8,132   | \$8,317   | \$8,504   | \$8,691   |
| + Market Land Value        | \$465,956 | \$462,390 | \$487,352 | \$429,107 |
| = Just Market Value        | \$609,414 | \$607,913 | \$634,941 | \$580,642 |
| = Total Assessed Value     | \$609,414 | \$607,913 | \$634,941 | \$580,642 |
| - School Exempt Value      | \$0       | \$0       | \$0       | \$0       |
| = School Taxable Value     | \$609,414 | \$607,913 | \$634,941 | \$580,642 |

**Land**

| Land Use               | Number of Units | Unit Type   | Frontage | Depth |
|------------------------|-----------------|-------------|----------|-------|
| RESIDENTIAL DRY (010D) | 2,221.80        | Square Foot | 26.5     | 89.5  |

**Buildings**

Building ID 1283  
 Style  
 Building Type S.F.R. - R1 / R1  
 Gross Sq Ft 1430  
 Finished Sq Ft 1133  
 Stories 2 Floor  
 Condition GOOD  
 Perimeter 203  
 Functional Obs 0  
 Economic Obs 0  
 Depreciation % 28  
 Interior Walls WALL BD/WD WAL

Exterior Walls ABOVE AVERAGE WOOD with 57% B & B  
 Year Built 1918  
 EffectiveYearBuilt 2000  
 Foundation WD CONC PADS  
 Roof Type GABLE/HIP  
 Roof Coverage METAL  
 Flooring Type CONC S/B GRND  
 Heating Type NONE with 0% NONE  
 Bedrooms 3  
 Full Bathrooms 3  
 Half Bathrooms 0  
 Grade 450  
 Number of Fire Pl 0

| Code  | Description    | Sketch Area | Finished Area | Perimeter |
|-------|----------------|-------------|---------------|-----------|
| FLE   | 4 SIDED SECT   | 276         | 276           | 0         |
| FAT   | FINISHED ATTIC | 165         | 0             | 0         |
| FLA   | FLOOR LIV AREA | 857         | 857           | 0         |
| OPF   | OP PRCH FIN LL | 102         | 0             | 0         |
| SBU   | UTIL UNFIN BLK | 30          | 0             | 0         |
| TOTAL |                | 1,430       | 1,133         | 0         |

## Yard Items

| Description   | Year Built | Roll Year | Quantity | Units  | Grade |
|---------------|------------|-----------|----------|--------|-------|
| WOOD DECK     | 1989       | 1990      | 1        | 424 SF | 1     |
| WALL AIR COND | 1993       | 1994      | 1        | 2 UT   | 1     |
| FENCES        | 1994       | 1995      | 1        | 852 SF | 2     |
| FENCES        | 1995       | 1996      | 1        | 108 SF | 2     |
| BRICK PATIO   | 2005       | 2006      | 1        | 36 SF  | 2     |
| BRICK PATIO   | 2005       | 2006      | 1        | 75 SF  | 2     |
| FENCES        | 2009       | 2010      | 1        | 128 SF | 2     |
| HOT TUB       | 1995       | 1996      | 1        | 1 UT   | 2     |

## Sales

| Sale Date  | Sale Price | Instrument      | Instrument Number | Deed Book | Deed Page | Sale Qualification | Vacant or Improved |
|------------|------------|-----------------|-------------------|-----------|-----------|--------------------|--------------------|
| 12/24/2010 | \$100      | Quit Claim Deed |                   | 2499      | 283       | 11 - Unqualified   | Improved           |
| 8/1/2008   | \$502,500  | Warranty Deed   |                   | 2374      | 1803      | Q - Qualified      | Improved           |
| 11/1/1997  | \$202,800  | Warranty Deed   |                   | 1486      | 2142      | U - Unqualified    | Improved           |
| 4/1/1995   | \$35,000   | Quit Claim Deed |                   | 1436      | 0546      | H - Unqualified    | Improved           |
| 11/1/1986  | \$74,500   | Warranty Deed   |                   | 994       | 1223      | U - Unqualified    | Improved           |
| 2/1/1977   | \$20,000   | Conversion Code |                   | 717       | 608       | Q - Qualified      | Improved           |

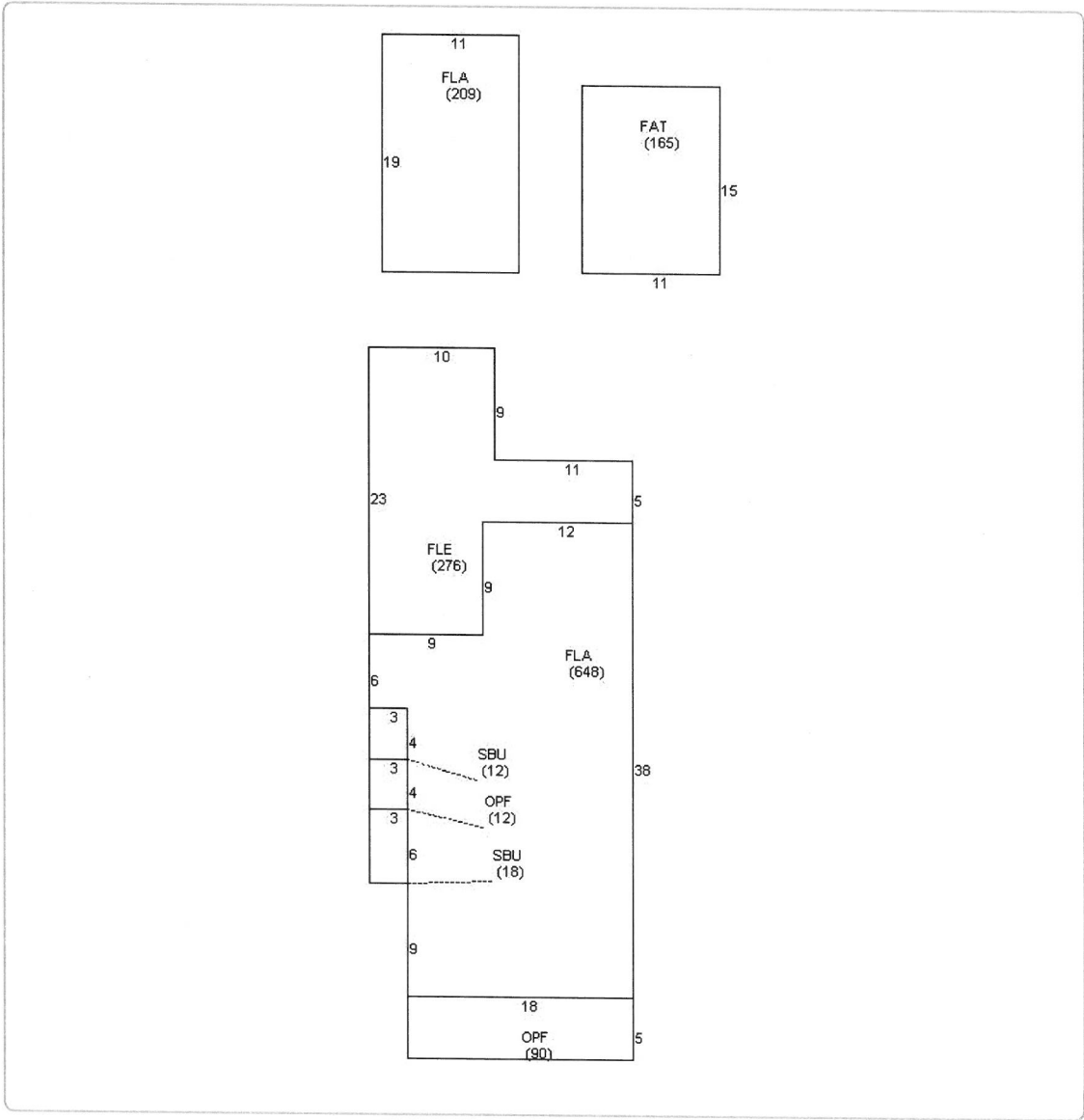
## Permits

| Number  | Date Issued | Date Completed | Amount   | Permit Type | Notes   |
|---------|-------------|----------------|----------|-------------|---|
| 15-2747 | 7/6/2015    | 3/17/2016      | \$8,000  |             | REMOVE EXISTING DOOR AND SECTION OF SIDING 168 SQ/FT, RE-FRAME TO MEET CODE AND INSTALL 2 HARC APPROVED WOOD WINDOWS, REINSTALL EXISTING SIDING, INSTALL HURRICANE SHUTTERS OVER THE NEW WINDOWS. (2) |
| 09-0001 | 1/7/2009    | 3/1/2010       | \$250    |             | INSTALL 32LF OF PICKET FENCE WITH GATE 42"H AT FRONT  |
| 05-4075 | 9/23/2005   | 10/17/2005     | \$500    |             | REPAIR SIDING   |
| 05-0256 | 2/4/2005    | 10/17/2005     | \$2,000  |             | REPLACE 4 WINDOWS, PAINT EXTER.   |
| 05-0075 | 1/11/2005   | 10/17/2005     | \$500    | Residential | REPLACEMENT OF FRONT DOOR   |
| 01-4031 | 2/1/2002    | 3/13/2002      | \$34,400 |             | PERMIT UPGRADE  |
| 01-4031 | 1/7/2002    | 3/13/2002      | \$20,500 |             | WIRE ADDITION   |
| 01-4031 | 1/7/2002    | 3/13/2002      | \$21,500 |             | PLUMBING  |
| 01-4031 | 1/7/2002    | 3/13/2002      | \$21,500 |             | ROOFING   |
| 01-4031 | 1/7/2002    | 3/13/2002      | \$34,400 |             | ADDITION 198SF  |
| 01-1324 | 3/23/2001   | 11/19/2001     | \$850    |             | EMERGENCY REPAIR ELECTRIC   |
| 96-4800 | 12/1/1996   | 10/1/1997      | \$3,885  |             | REPAIR/REMODEL  |
| 952496  | 8/1/1995    | 12/1/1995      | \$1,280  |             | ELECTRICAL  |
| 952497  | 8/1/1995    | 12/1/1995      | \$55,000 | Residential | BUILD 11 X 19 BLDG  |
| 952635  | 8/1/1995    | 12/1/1995      | \$1,600  |             | PLUMBING 5 FIXTURES   |

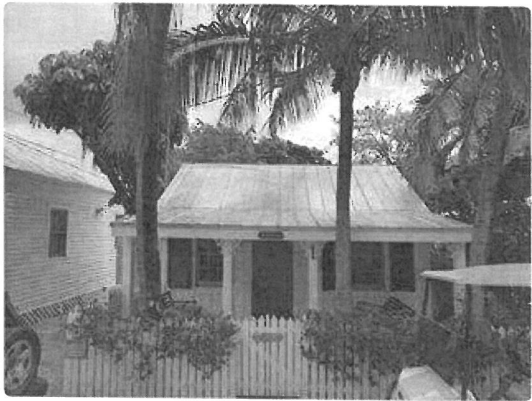
## View Tax Info

[View Taxes for this Parcel](#)

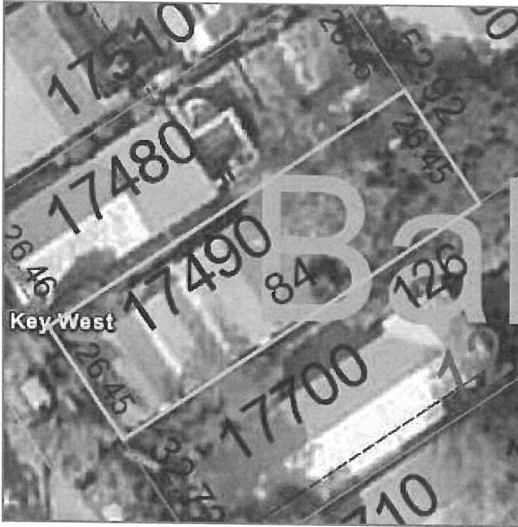
## Sketches (click to enlarge)



Photos



## Map



## TRIM Notice

[2021 TRIM Notice \(PDF\)](#)

2021 Notices Only

**No data available for the following modules: Commercial Buildings, Mobile Home Buildings, Exemptions.**

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the

[User Privacy Policy](#)  
[GDPR Privacy Notice](#)

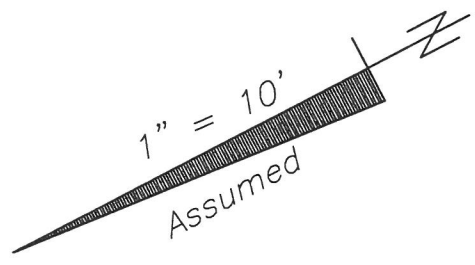
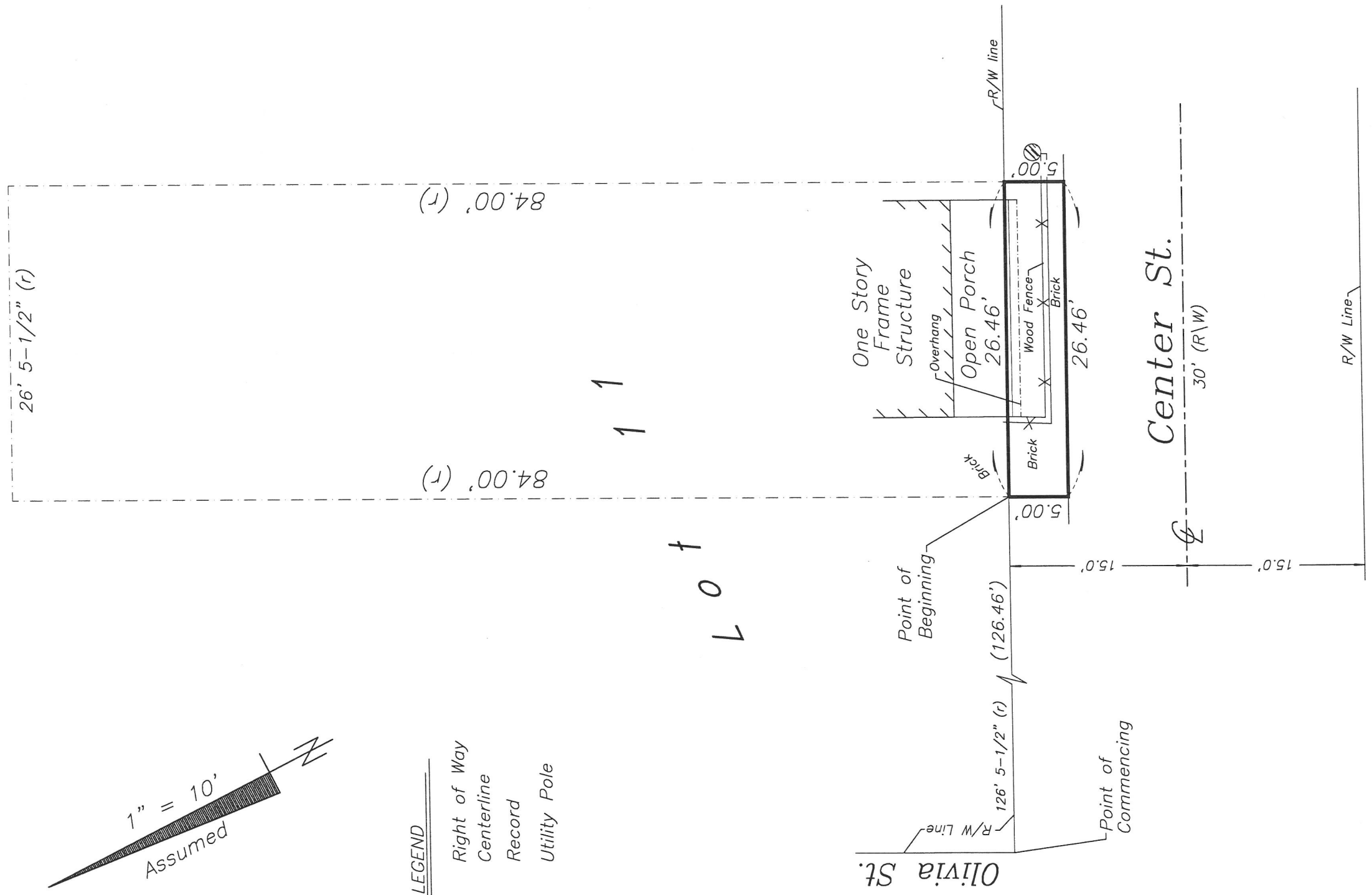
Last Data Upload: 9/16/2021, 2:39:05 AM

Developed by  
 Schneider  
GEO SPATIAL

Version 2.3.147

# **Boundary Survey**

Specific Purpose Survey to illustrate a legal description of a portion of the right of way of Center Street, adjacent to Lot 11 in Square 8, Tract 4, of S.M. Baldwin's Subdivision Island of Key West, prepared by the undersigned



**LEGEND**

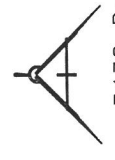
- R/W Right of Way
- ☒ Centerline
- (r) Record
- ⊗ Utility Pole

NOTE:  
This Survey Map is not full and complete without the attached Survey Report.

Sheet One of Two Sheets

**J. LYNN O'FLYNN, Inc.**

Professional Surveyor & Mapper  
PSM #6298



3430 Duck Ave., Key West, FL 33040  
(305) 296-7422 FAX (305) 296-2244

Specific Purpose Survey to illustrate a legal description of a portion of the right of way of Center Street, adjacent to Lot 11 in Square 8, Tract 4, of S.M. Baldwin's Subdivision Island of Key West, prepared by the undersigned

**NOTES:**

1. The legal description shown hereon was authored by the undersigned.
2. Underground foundations and utilities were not located.
3. All angles are 90° (Measured & Record) unless otherwise noted.
4. Street address: 911 Center Street, Key West, FL.
5. This survey is not valid without the signature and the original raised seal of a Florida licensed surveyor and mapper.
6. Lands shown hereon were not abstracted for rights-of-way, easements, ownership, or other instruments of record.
7. North Arrow is assumed and based on the legal description.
8. Adjoiners are not furnished.
9. The description contained herein and sketch do not represent a field boundary survey.
10. This Survey Report is not full and complete without the attached Survey Map.

**SPECIFIC PURPOSE SURVEY TO ILLUSTRATE A LEGAL DESCRIPTION  
AUTHORED BY THE UNDERSIGNED**

A parcel of land on the Island of Key West of Tract 4 according to William A. Whitehead's Map of plan of said Island, delineated in February, 1829 and is a portion of the right of way of Center Street adjacent to Subdivision 11 of Lot 1 in said Tract 4 according to S.M. Baldwin's Subdivision of Lots 1 and 3 of Square 8 of Simonton and Walls Addition, said parcel being more particularly described by metes and bounds as follows:  
COMMENCE at the intersection of the Northeasterly right of way line of Center Street with the Southeasterly right of way line of Olivia Street and run thence in a Southeasterly direction along the Northeasterly right of way line of Center Street for a distance of 126.46 feet to the Point of Beginning; thence continue Southeasterly along the Northeasterly right of way line of Center Street for a distance of 26.46 feet; thence Southwesterly and at right angles for a distance of 5.00 feet; thence Northwesterly and at right angles for a distance of 26.46 feet; thence Northeasterly and at right angles for a distance of 5.00 feet back to the Point of Beginning, containing 132 square feet, more or less.

SPECIFIC PURPOSE SURVEY FOR: Bruce Buckbee; City of Key West;

I HEREBY CERTIFY that this survey was made under my responsible charge and meets the Standard of Practice as set forth by the Florida Board of Professional Surveyors & Mappers in Chapter 5J-17, Florida Administrative Code, pursuant to Section 472.027, Florida Statutes.

J. LYNN O'FLYNN, INC.

J. Lynn O'Flynn, PSM  
Florida Reg. #6298

August 11, 2021

THIS SURVEY  
IS NOT  
ASSIGNABLE

Sheet Two of Two Sheets

J. LYNN O'FLYNN, Inc.



Professional Surveyor & Mapper  
PSM #6298

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