39. Smoke detector	r Information:	Disclos	sure Report	Office	Use, ONLY:	Add
Smoke detector(s) Properly located	<u>Y</u> Y		n-In-Sale of Housing	Date R	eceived	Address
*Hard-Wired	* <u>Y</u>	(Carefully re	ead this entire report)	Payme	nt Ref:	Ĩ
*if N or H see note on p.		гу рутне сіту (OF ST. PAUL OR EVAL		ue entide	<u> </u>
			BUILDING COMPON			16
		the buyer prior to the	the premises when the hou time of signing a Purchas		prospective buyers,	and \mathbf{r}
Address of Evalu	ated Dwelling:	1116 Pacific Stre	et street type and/or direction m	nay be returned and	may incur a late fee.	
Owner's Name:		Earl Miller		-	-	- H
Owner's Address	s:	1116 Pacific Stre		106		_ <u> </u>
Current <u>Usage</u> of this dwelling:	X Single Fa	mily D Townhouse	Condo * those items include the	located within the r common use area, o	valuation includes only esidential units and does or other residential areas	s not 🖸
Ū.		e legal. See below.	the structure	e.		S
Comments:						H
	ked then the informat		RESTRICTION IN his dwelling. This informa			REET
According to info	rmation provided to	Truth-In-Sale of H	ousing Evaluators by th	e City of St. P	aul this property:	
* IS A Regist Even if the	ered Vacant Building. is box is not now marked t	The conditions applica his dwelling may become	ble to a sale are different by me a vacant building before th		date of this report.	
Cat 1: New ow	mers must re-register	the building and pay a	ll outstanding fees and ob	tain permission	for occupancy.	
Written perm	ission from the Ci	ty of Saint Paul is 1	equired before a Cat	2 or Cat 3 VB	can be sold.	
Cat 2: Requirements include: 1. register/re-register the building, 2. Pay outstanding fees, 3. obtain a code compliance report, 4. submit for approval a rehab cost estimate from a licensed contractor and a schedule for completion of all code compliance work, 5. submit proof of financial responsibility acceptable to the City.						
	-		of Occupancy or Certif			
			ne. You must contact the Ci and requirements that may			. \
Preservati is required	on Site. Review and ap	proval of exterior work vation Commission and	or is individually design (excluding painting), modific city staff. For questions rega	cations, additions	and demolition	3/2
X HAS Open per	mits. Go to the DS	website (see below), cli strictions or requirements	ck on ''Look Up Property s may apply. Call 651-266- 9	9090 for permit in		<u> </u>
			a duplex and this box is <u>not</u> into a property's history may		t DSI Zoning at	2
			DSI website, then enter t nspections, then click or			a''
This Report:						pa
requirements of the L		this evaluation form will be	to the time of sale. This report to e used by the Fire Department to			page 1 of
2. is based on the current		g Evaluator Guidelines, and	is based upon different standard	ds than the lender, F	Federal Housing	4
-			ion of the building component,	•	•	
•	listed on the form and on during the heating season	•	ble at the time of the evaluation e condition of the roofing, disast		is not required to operat luate inaccessible areas.	
5. is valid for one year f	from the date of issue and	only for the owner named o	n this report.			
	· ·		Complaints regarding this repo		ed to	
-			cam, Phone No. 651-266-1900		01/02/2012	D
EVALUATOR:	Dave	Kirwin	PHONE: 612-991-15	DATE:	01/03/2012	Rev 3/2009

Rating Key: M = Meets minimum B = Below minimum C = See Comment H = Hazardous Y = Yes N = No NV = Not Visible/Viewed NA = Not Applicable

Item

Comments Specify location(s), where necessary

BASEMENT/CELLAR

1. Stairs and handrails	B
2. Basement/cellar floor	M
3. Foundation	
4. Evidence of dampness or staining	
5. First floor, floor system	
6. Beams and columns	-

	ELECTRICAL SERVICE(S) # of Services	1
7.	Service size:	
	Amps: 30 60 100 150 Other _	200
	Volts: 115 115/220 _X	
	BASEMENT ONLY:	
8.	Electrical service installation/grounding	Μ
	Electrical wiring, outlets and fixtures	М

PLUMBING SYSTEM

10. Floor drain(s) (basement).	B
11. Waste and vent piping (all floors)	
12. Water piping (all floors)	
13. Gas piping (all floors)	
14. Water heater(s), installation	
15. Water heater(s), venting	
16. Plumbing fixtures (basement)	

HEATING SYSTEM(S) # of	1
17. Heating plant(s): Type: <u>Water</u> Fuel: <u>Gas</u>	
a. Installation and visible condition	М
b. Viewed in operation (required in heating season)	Y
c. Combustion venting	

The Evaluator is not required to operate the heating plant(s), except during heating season, between October 15 and April 15.

18. Additional heating unit(s) Type: Fuel:	
a. Installation and visible condition	-
b. Viewed in operation	
c. Combustion venting	
e e	

19. ADDITIONAL COMMENTS (1 through 18) ____

EVALUATOR:	
D THEOTHORS.	

Dave Kirwin

- 1. B Steep stairs. Uneven risers.
- 4. Some small stains in several areas.
- 6. B Adjustable steel posts in use, may not have proper footings.

- 10. B Floor drain full of debris, Dirty floor drain.
- 12. B No backflow preventer at the outside faucet.
- 16. B The laundry tub drains onto the floor, then to the floor drain.

Property Address: ______ 1116 Pacific Street

Rating Key: M = Meets minimum B = Below minimum C = See Comment H = Hazardous Y = Yes N = No NV = Not Visible/Viewed NA = Not Applicable Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related. Item # Comments

			nem #	Comments
	KITCHEN			
	Walls and ceiling	<u></u>		
	Floor condition and ceiling height	<u></u>		
	Evidence of dampness or staining	<u> </u>		
	Electrical outlets and fixtures	<u></u>		
24.	Plumbing fixtures	<u></u>		
	Water flow	<u></u>		
	Window size/openable area/mechanical exhaust	<u></u>		
27.	Condition of doors/windows/mech. exhaust	M		
	LIVING AND DINING ROOM(S)	D		
	Walls and ceiling	<u> </u>	28. B Damag	
	Floor condition and ceiling height	<u></u>		g window ash at the livingroom. Some
	Evidence of dampness or staining	<u> </u>	damaged	WINDOWS.
	Electrical outlets and fixtures	<u></u>		
	Window size and openable area	<u></u>		
33.	Window and door condition	<u> </u>		
	HALLWAYS, STAIRS AND ENTRIES			
	Walls, ceilings, floors	<u></u>		
	Evidence of dampness or staining	<u> </u>		
	Stairs and handrails to upper floors	<u></u>		
	Electrical outlets and fixtures	<u></u>		
38.	Window and door condition	<u></u>		
39.	Smoke detector(s)	<u>Y</u>		
	Properly located	<u>Y</u>		
	* Hard-wired (HWSD).	* <u>Y</u>		
*if	N or H in a single family home then SPFire Dept requires	HWSD installati	on	
	BATHROOM(S)			we dow that hat has a second similar (d at
	Walls and ceiling	<u></u>		under the bathroom sink. (1st
	Floor condition and ceiling height	<u></u>	floor) Non	
	Evidence of dampness or staining	<u> </u>		ow when several fixtures are
	Electrical outlets and fixtures	<u> </u>	running.	
	Plumbing fixtures	<u> </u>		
	Water flow			
	Window size/openable area/mechanical exhaust	<u> </u>		
47.	Condition of windows/doors/mech. exhaust	<u> </u>	10 D Sama	warn plantar at walla and apilinga
40	SLEEPING ROOM(S)	В		worn plaster at walls and ceilings. windows are close to the floor.
	Walls and ceiling			
	Floor condition, area, and ceiling height	<u></u>	55. D Wealin	ered window(s). Some worn windows.
	Evidence of dampness or staining			
	Electrical outlets and fixtures	<u></u> 		
	Window size and openable area	<u>B</u>		
53.	Window and door condition			
~ 4	ENCLOSED PORCHES AND OTHER R	DOMS M		
	Walls, ceiling, and floor, condition	N		
	Evidence of dampness or staining	 		
	Electrical outlets and fixtures	 M		
57.	Window and door condition		59 50 60	61 Not accessible. No visible
7 0	ATTIC SPACE (Visible Areas)	С		
	Roof boards and rafters	 NA	allic aleas	s. (Vaulted)
	Evidence of dampness or staining	 NA		
	Electrical wiring/outlets/fixtures	 NA		
	Ventilation	 NA		
62.	ADDITIONAL COMMENTS (20 through 61)			
	CO Detector information reported here			

EVALUATOR:

Dave Kirwin

____ DATE: ____01/03/2012

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EXTERIOR (Visible Areas)

63. Foundation	<i>C</i>
64. Basement/cellar windows	B
65. Drainage (grade)	
66. Exterior walls	
67. Doors (frames/storms/screens)	
68. Windows (frames/storms/screens)	
69. Open porches, stairways and decks	
70. Cornice and trim	
71. Roof structure and covering	~ -
72. Gutters and downspouts	
73. Chimneys	
74. Outlets, fixtures and service entrance	

GARAGE(S)/ACCESSORY STRUCTURE(S)

75. Roof structure and covering	С
76. Wall structure and covering	
77. Slab condition	-
78. Garage doors(s)	_
79. Garage opener(s) - (see important notice #6)	
80. Electrical wiring, outlets and fixtures	
81. ADDITIONAL COMMENTS (62 through 80)	

FIREPLACE/WOODSTOVES # of	0
82. Dampers installed in fireplaces	NA
83. Installation	NA
84. Condition	NA

••••••••

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (V/N NA NV only)

whether items meet minimi	ards (Y/N	(Y/N, NA, NV, only)		
INSULATION	Y/N	Туре	Inches/Depth	
85. Attic Insulation	NV			
86. Foundation Insulation	NV			
87. Kneewall Insulation	NV			
88. Rim Joist Insulation	NV			

89. ADDITIONAL COMMENTS (81 through 88) ____

I hereby certify I prepared this report in compliance with the St. Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.

Evaluator Signature		612-991-1546 Phone Number	01/03/2012 Date	Page <u>4</u> of <u>4</u> Rev 3/2009
Printed Name:	Dave Kirwin			
IMPORTANT NOTICES				
 Any single family residence in St. Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, 651-266-9090. (St. Paul Legislative Code, Chapter 58.) Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Utility, (651) 266-6234. A house built before 1978 may have lead paint on/in it. If children ingest lead paint, they can be poisoned. For more information call Ramsey County Public Health, 651-266-1199. 				
 4. Neither the City of St. Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above. 5. If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at 651-266-9008. 6. An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately 				
repaired or replaced.				

Item # Comments

- 63. C Most areas not visible due to siding / grade.
- 64. B Some worn window frames.
- 65. B Some areas do not allow surface water to drain away from building.
- 68. B Some worn window frames and sash. Some worn screens. Damaged / missing storms/screens.
- 71. B Some worn shingles.
- 71. C Some areas are not visible due to partial snow cover.
- 75. C Snow/frost covered can't view.
- 77. B Worn concrete slab.
- 78. B Some worn areas. Worn service door. Overhead door is deteriorated.
- 79. Opener not operating.
- 80. B Some surface mounted romex wiring. Some improper wiring materials. missing knockout(s).