

City of Saint Paul
 Department of Safety and Inspections
VACANT BUILDING REGISTRATION FORM

Date: January 17, 2023
 Address of Property: 729 Hawthorne Avenue East

Planned disposition of this building (please check one):

- I plan to rehabilitate this structure commencing (date): _____
- I plan to demolish (wreck and remove) this building by (date): _____
- I am willing to authorize the City of Saint Paul to demolish and remove this building(s).
- This building is **vacant as a result of fire damage**. The fire occurred on (date) 12/7/2022

I, as the property owner, want to claim registration and fee exemption status for ninety (90) days from the date of the fire. I intend to repair and reoccupy the building.

Other: _____

Responsible Party: Persons/organizations who will ensure compliance with the ordinance:

| NAME | ADDRESS | PRIMARY PHONE | ALTERNATE PHONE |
|---|---------------------|---------------------|-------------------------|
| <u>Kyaw Die + Myint Aye - currently living with</u> | | <u>651-703-4087</u> | |
| <u>Tung Aung (Kyaw Die's younger brother)</u> | <u>1652 Pacific</u> | <u>651-200-9073</u> | |
| <u>Thu Zarnhe (Tung's wife?)</u> | " | " | <u>- speaks English</u> |

Persons, lien holders, mortgagees, mortgagors and other interested parties known to me:

| NAME | ADDRESS | PRIMARY PHONE | ALTERNATE PHONE |
|-------------------------------------|---------|---------------------------------|-----------------|
| <u>Universal (Insurance Co.)</u> | | <u>need this + contact info</u> | |
| <u>Wells Fargo (holds mortgage)</u> | | " | |

All persons listed here will receive letters for the annual fee renewal. *Also use this form to de-register your interest.*

| | |
|---|---|
| <p><u>Kyaw Die & Myint Aye</u></p> <hr/> <p>Print Your Name (legibly)</p> <hr/> <p>Signature <u>currently: 1652 Pacific, may be moving if insurance helps</u></p> <hr/> <p>Address <u>St. Paul</u></p> <hr/> <p>City _____ State _____ Zip _____</p> <hr/> <p><u>651-703-4087</u></p> <p>main contact telephone _____ alternate phone _____</p> <hr/> <p>Email address (print legibly)</p> <hr/> | <p>\$2,127.00 Registration Fee:</p> <p>INSTRUCTIONS:</p> <p><i>Complete and return this form. Include the \$2,127.00 registration fee, ONLY if it is now due. For questions, call 651-266-8989.</i></p> <p>Make checks payable to: <u>City of Saint Paul</u></p> <p>Make Payment at, or mail payment to:</p> <p align="center"> City of Saint Paul Department of Safety and Inspections Code Enforcement – Vacant Buildings 375 Jackson Street, Suite 220 St. Paul, MN 55101-1806 </p> <p><i>Credit Card payment accepted in person, or by FAX, only. Fax to: 651-266-9124</i></p> <p>Thank you for your cooperation</p> |
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- Filled out by Marcia Moermond during 1/17/23 Legislative Hearing with assistance of Karen interpreter.

- Fee waived for 90-days