



# APPLICATION FOR APPEAL

## Saint Paul City Council – Legislative Hearings

310 City Hall, 15 W. Kellogg Blvd.

Saint Paul, Minnesota 55102

Telephone: (651) 266-8585

received 4/24/20

### We need the following to process your appeal:

- \$25 filing fee (non-refundable) (payable to the City of Saint Paul) (if cash: receipt number paid by check)
  - Copy of the City-issued orders/letter being appealed
  - Attachments you may wish to include
  - This appeal form completed
  - Walk-In OR  Mail-In **dropped off**
- for abatement orders only:  Email OR  Fax

<p><b>HEARING DATE &amp; TIME</b>          (provided by Legislative Hearing Office)          Tuesday, <b>APRIL 28, 2020</b></p> <p>Time <b>between 10:45-11:30 am</b></p> <p>Location of Hearing:          Room 330 City Hall/Courthouse  <b>via telephone</b></p>
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### Address Being Appealed:

Number & Street: 896 York City: St. Paul State: MN Zip: \_\_\_\_\_

Appellant/Applicant: Shona Jackson Email realtorshonajackson@gmail.com

Phone Numbers: Business 612-704-7692 Residence \_\_\_\_\_ Cell \_\_\_\_\_

Signature: Shona Jackson Date: 4-23-20

Name of Owner (if other than Appellant): Myshon Home Renovations LLC

Mailing Address if Not Appellant's: \_\_\_\_\_

Phone Numbers: Business 612-704-7692 Residence \_\_\_\_\_ Cell \_\_\_\_\_

### What Is Being Appealed and Why?

Attachments Are Acceptable

- Vacate Order/Condemnation/ Revocation of Fire C of O
  - Summary/Vehicle Abatement
  - Fire C of O Deficiency List/Correction
  - Code Enforcement Correction Notice
  - Vacant Building Registration
  - Other (Fence Variance, Code Compliance, etc.)
- Comments: \_\_\_\_\_

**Appellant want to appeal status of the Vacant Building**

**VB fee paid by Altisource**

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

Date: \_\_\_\_\_

Address of Property: 896 YORK AVE, SAINT PAUL, MN 55106

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) \_\_\_\_\_.

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: The Property will be maintained and secured until sold.

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

NAME	ADDRESS	PRIMARY PHONE	ALTERNATE PHONE
Safeguard Properties	7887 Safeguard Circle Valley View, OH 44125	(216) 739-2900	<u>cardssupport@safeguardproperties.com</u>

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

NAME	ADDRESS	PRIMARY PHONE	ALTERNATE PHONE
US Bank National Association	4801 Frederica Street Owensboro, KY 42301	800-365-7772	<u>VacantPropertyRegistration@usbank.com</u>

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

<p>Altisource Single Family Inc</p> <hr/> <p><b>Print Your Name (legibly)</b></p> <p><i>Altisource Single Family Inc</i></p> <hr/> <p><b>Signature</b></p> <p>4801 Frederica Street</p> <hr/> <p><b>Address</b></p> <table border="0" style="width: 100%;"> <tr> <td>Owensboro</td> <td style="text-align: center;">KY</td> <td style="text-align: right;">42301</td> </tr> <tr> <td><b>City</b></td> <td><b>State</b></td> <td><b>Zip</b></td> </tr> </table> <hr/> <p>800-365-7772</p> <hr/> <table border="0" style="width: 100%;"> <tr> <td><b>main contact telephone</b></td> <td style="text-align: right;"><b>alternate phone</b></td> </tr> </table> <hr/> <p>VacantPropertyRegistration@usbank.com</p> <hr/> <p><b>Email address (print legibly)</b></p>	Owensboro	KY	42301	<b>City</b>	<b>State</b>	<b>Zip</b>	<b>main contact telephone</b>	<b>alternate phone</b>	<p><b>\$2,127.00 Registration Fee:</b></p> <p><b>INSTRUCTIONS:</b></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><b>Make checks payable to: City of Saint Paul</b></p> <p><b>Make Payment at, or mail payment to:</b></p> <p style="text-align: center;"> <b>City of Saint Paul</b>  <b>Department of Safety and Inspections</b>  <b>Code Enforcement – Vacant Buildings</b>  <b>375 Jackson Street, Suite 220</b>  <b>St. Paul, MN 55101-1806</b> </p> <p style="text-align: center;"><i>Credit Card payment accepted in person, or by FAX, only. Fax to: 651-266-9124</i></p> <p style="text-align: center;"><b>Thank you for your cooperation</b></p>
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**Folder Name:** 896 YORK AVE  
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