



APPLICATION FOR APPEAL

RECEIVED

DEC 14 2011

CITY CLERK

Saint Paul City Clerk

310 City Hall, 15 W. Kellogg Blvd.

Saint Paul, Minnesota 55102

Telephone: (651) 266-8560

The City Clerk needs the following to process your appeal:

- \$25 filing fee payable to the City of Saint Paul (if cash: receipt number _____)
- Copy of the City-issued orders or letter which are being appealed
- Attachments you may wish to include
- This appeal form completed
- Walk-In OR Mail-In

25⁰⁰

YOUR HEARING Date and Time:

Tuesday, 1/3/12

Time 1:30

Location of Hearing:
Room 330 City Hall/Courthouse

Emailed 12-14-11 James

Address Being Appealed:

Number & Street: 1343 Stillwater Ave City: St. Paul State: MN Zip: _____

Appellant/Applicant: James Schaffman Email JKBS2004@comcast.net

Phone Numbers: Business 651-686-7603 Residence _____ Cell 651-335-9369

Signature: *James Schaffman* Date: 12-10-11

Name of Owner (if other than Appellant): _____

Address (if not Appellant's): *NA*

Phone Numbers: Business _____ 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
- Fire C of O: Only Egress Windows
- Code Enforcement Correction Notice
- Vacant Building Registration
- Other

#4 of letter (attached)
#1 of letter (attached)



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-8951
Web: www.stpaul.gov/dsi

December 7, 2011

JBI & ASSOCIATES INC
557 HAWTHORNE WOODS DR STE 104
EAGAN MN 55123-3060

FIRE INSPECTION CORRECTION NOTICE

RE: 1343 STILLWATER AVE
Ref. #112559
Residential Class: B

Dear Property Representative:

Your building was inspected on December 7, 2011 for the renewal of your Fire Certificate of Occupancy. Approval for occupancy will be granted upon compliance with the following deficiency list. The items on the list must be corrected prior to the re-inspection date. A re-inspection will be made on January 10, 2012 at 1:00P.M..

Failure to comply may result in a criminal citation or the revocation of the Fire Certificate of Occupancy. The Saint Paul Legislative Code requires that no building shall be occupied without a Fire Certificate of Occupancy. The code also provides for the assessment of additional re-inspection fees.

YOU WILL BE RESPONSIBLE FOR NOTIFYING TENANTS IF ANY OF THE FOLLOWING LIST OF DEFICIENCIES ARE THEIR RESPONSIBILITY.

DEFICIENCY LIST

1. **Awning windows** - SPLC 34.13 (4) - Provide and maintain a minimum egress window sill height of 48 inches. Refer to provide handout EW-1 for more information.-Bedroom windows sill is 59inches. All bedrooms windows are 39inches in width and 8inches openable height
2. SPLC 34.11 (6), 34.34 (3) - Provide service of heating facility by a licensed contractor which must include a carbon monoxide test. Submit a completed copy of the Saint Paul Fire Marshal's Existing Fuel Burning Equipment Safety Test Report to this office. *asae*

Done

3. SPLC 39.02(c) - Complete and sign the provided smoke detector affidavit and return it to this office.
4. NFPA 211,9-2 - Have the chimneys, fireplaces, and vents inspected for soundness, freedom from deposits, and correct clearances. Cleaning, maintenance, and repairs shall be done if indicated by the inspection.

Saint Paul Legislative Code authorizes this inspection and collection of inspection fees. For forms, fee schedule, inspection handouts, or information on some of the violations contained in this report, please visit our web page at: <http://www.stpaul.gov/cofo>

You have the right to appeal these orders to the Legislative Hearing Officer. Applications for appeals may be obtained at the Office of the City Clerk, 310 City Hall, City/County Courthouse, 15 W Kellogg Blvd, Saint Paul MN 55102 Phone: (651-266-8688) and must be filed within 10 days of the date of this order.

If you have any questions, email me at: james.thomas@ci.stpaul.mn.us or call me at 651-266-8983 between 7:30 a.m. - 9:00 a.m. Please help to make Saint Paul a safer place in which to live and work.

Sincerely,

James Thomas
Fire Inspector

Reference Number 112559

Supervisor
Leanna
Shaff
651-266-8980

James Thomas, CFI
Fire Inspector



CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS



375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
Tel: 651-266-8983
Fax: 651-266-8951
E-mail: james.thomas@ci.stpaul.mn.us

James Thomas

DEPARTMENT OF FIRE AND SAFETY SERVICES
FIRE PREVENTION DIVISION

100 EAST 11th STREET, SAINT PAUL, MN 55101

EXISTING FUEL BURNING EQUIPMENT SAFETY TEST REPORT

(Use separate form for each appliance)

Address: 1343 SYMINGTON AVE ST. PAUL Date: 12-8-11
Owner: SABER LTD

TYPE OF HEAT:

Gravity Air Forced Air Gravity Hot Water Forced Hot Water
Steam Unit Heater Space Heater Other

TYPE OF FUEL: Gas Oil Other

GAS DESIGN

Make of Burner DUCANE
Model MFGA100B4B
Serial 8538692641
Input 100,000

CONVERSION

Make
Model
Max. BTU Rating
Make of Furnace

Equipment venting type: Atmospheric Induced Fan Other

Total BTU input of all vented gas appliances per chimney: 140,000

Type of Chimney: Masonry Class B Other

Type of Liner: None Metal Clay Tile

Combustible Air Supply: Yes N/A Recommended

<u>Safety & Operating Control Tests:</u>	<u>Yes</u>	<u>No</u>	<u>Fuel Analysis/Flue Gas Analysis:</u>	<u>Yes</u>	<u>No</u>
Pilot/Flame Safeguard Operating Properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vents Properly Without Sillage	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Limit(s) Operating Properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Flame Stays Inside/Doesn't Roll Out	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Operator(s) Operating Properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Burner Lights Smoothly	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Low Water Cut-Off Operating Properly	<u>NA</u>	<input type="checkbox"/>			
All Controls Operating Properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

	<u>Initial</u>	<u>Final</u>	<u>Visual Inspection</u>	<u>Yes</u>	<u>No</u>
Stack Temperature	<u>F/Net</u>	<u>385 F/Net</u>	Fuel Piping System--Okay	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Oxygen	<u>%</u>	<u>9.4 %</u>	Vent Systems--Drafthood	<input type="checkbox"/>	<input type="checkbox"/>
Carbon Dioxide	<u>%</u>	<u>6.4 %</u>	Connector, Vent Chimney--Okay	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Carbon Monoxide	<u>%/ppm</u>	<u>0 %/ppm</u>	Heating Unit--Okay	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Carbon Monoxide Detector (tube type)	<u>Positive</u>	<input type="checkbox"/>	Negative	<input type="checkbox"/>	<input type="checkbox"/>

Look At Total Heating System Before You Leave:
Does system operate safely and properly? Yes No

COMMENTS: _____

Have above corrections been made? Yes No

Name of Licensed Contractor: Boe's Heating, Air, and Appliance Repair Phone # 651-459-8300

Address: P.O. Box 342, Cottage Grove, MN 55016

Person Doing Test: (print) Don Boe (signature) [Signature]

Certificate of Competency Number From City of Saint Paul for Appropriate Fuel: N 2005281 RH1(9/95)

