



CITY OF SAINT PAUL
INTERDEPARTMENTAL MEMORANDUM

RECEIVED
JAN 20 2012
CITY CLERK

EGRESS WINDOW NON-COMPLIANCE DETERMINATION

TO: CITY CLERK
15 KELLOGG BLVD. WEST
310 CITY HALL
SAINT PAUL, MN 55102

PHONE: 651-266-8688
FAX: 651-266-8574

DATE: 1-20-12

APPEAL PROPERTY ADDRESS: 730 Como

APPLICANT NAME: PUBLIC HEALTH (DANIEL SCHMIDT) PHONE NUMBER: 651-266-1143

PERMIT NUMBER: _____

TYPE OF WINDOW: DH

NUMBER OF WINDOWS: 2

TOTAL GLAZED AREA: 9.8 sqft

DIFFERENCE FROM REQUIRED AREA: COMPLIES

WIDTH OF OPENING: 25.2"

DIFFERENCE FROM REQUIRED OPENING: COMPLIES

HEIGHT OF OPENING: 22"

DIFFERENCE FROM REQUIRED OPENING: 2"

HEIGHT OF OPENING
TO FINISHED FLOOR: 248"

DIFFERENCE FROM MAXIMUM HEIGHT: COMPLIES

RECOMMENDATION (IF APPLICABLE):

FROM: _____

No. 9561 P. 2

Public Health
St Paul-Ramsey Co.

1:09PM
Jan. 20. 2012

No. 9561 P. 3

Jan. 20. 2012 1:09PM St Paul-Ramsey Co. Public Health

*

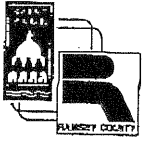
→

Select a Model		Min. W: 11	Max. W: 52
		Min. H: 20	Max. H: 84
		Min. U: 132	
(Model 0201) Excalibur Double Hung		Exact Size	
Top Sash Width	29.5750	Width: 29.625	29.625
Top Sash Height	27.2500	Height: 57.625	57.625
Bottom Sash Width	27.3750		
Bottom Sash Height	28.2600		
Top Glass Width	24.6875		
Top Glass Height	28.6625		
Bottom Glass Width	25.6875		
Bottom Glass Height	28.6625		
Screen Width	25.8375		
Screen Height	24.7500		
Top Sash Weight (Plus 5 lb)	22 lb		
Top Balance Size (C.F.)	58BU		
Top Balance Size (Spiral)	25-9R		
Bottom Sash Weight	19 lb		
Bottom Balance Size (C.F.)	55RD		
Bottom Balance Size (Spiral)	27-3R		
Egress Opening Width	25.2190		
Egress Opening Height	22.6028		
Egress Opening Area (sq.ft.)	3.8540		

Extrusion:	Select Extrusion	<< For Arch. Top Models Only
Opening:	Exact Size	
Type:	Standard	
Screen:	Fib	
Glass:	Double Strength (3 mm)	

AC Sash Calculator

* 25.9 x 54.7 = 1,416 ÷ 144 = 9.8 sq ft



Saint Paul - Ramsey County Department of Public Health
 Environmental Health Section
 2785 White Bear Avenue North Suite 350
 Maplewood, MN 55109-1320
 FAX: (651) 266-1177

Date: 1-20-12

FACSIMILE TRANSMISSION
 Cover Sheet and Transmittal Form

To FAX#: 6-8574

2-7-12 0-1:30

To:	<u>Mai Yang, Paralegal</u>
Location:	<u>Legislative Hearing Office City of St. Paul</u>
Sender:	<u>Daniel Schmidt / Tim Yannarelli St. Paul - Ramsey Cty. Dept. of Public Health</u>

This transmission consists of 3 pages (including cover sheet).

If transmission is incomplete or illegible, call sender at (651) 266-1143 (DANIEL SCHMIDT)

message:

Request for Egress Window Non-Compliance Determination
Attachments: Egress Window Non-Compliance Determination Form

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P. 1
 No. 9561
 Public Health
 Ramsey Co.
 St Paul
 1:09PM
 Jan. 20, 2012

Scanned