



APPLICATION FOR APPEAL

RECEIVED
JUL 20 2017
CITY CLERK

Saint Paul City Council – Legislative Hearings

310 City Hall, 15 W. Kellogg Blvd.

Saint Paul, Minnesota 55102

Telephone: (651) 266-8585

WARD 1

We need the following to process your appeal:

☒ \$25 filing fee (non-refundable) (payable to the City of Saint Paul)

(if cash: receipt number 3003)

☒ Copy of the City-issued orders/letter being appealed

☒ Attachments you may wish to include

☒ This appeal form completed

☒ Walk-In OR ☐ Mail-In

for abatement orders only: ☐ Email OR ☐ Fax

HEARING DATE & TIME

(provided by Legislative Hearing Office)

Tuesday, July 25

Time 11 am

Location of Hearing:

Room 330 City Hall/Courthouse

Address Being Appealed:

Number & Street: 686 Iglegart Ave City: St Paul State: MN Zip: 55104

Appellant/Applicant: Rentiss Hamille & Prensse Hamille Email: Halibarton.Prensse@gmail.com

Phone Numbers: Business _____ Residence _____ Cell: (651) 500-1368

Signature: _____ Date: _____

Name of Owner (if other than Appellant): Rentiss Hamille

Mailing Address if Not Appellant's: Same

Phone Numbers: Business _____ Residence _____ Cell: Same

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.)



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street., Suite 220
Saint Paul, MN 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-1919
Web: www.stpaul.gov/dsi

- Yog hais tias koj hais tsis to taub tsab ntawv no, hu rau tus txhais lus ntawm (651) 266-8989. Nws yog pab dawb zwb.
- Si necessita un traductor, por favor llamanos al (651)266-8989. No costo.

330

July 11, 2017

Prentiss Hamilton
686 Iglehart Ave
St Paul MN 55104-5535

CORRECTION NOTICE

RE: 686 IGLEHART AVE
File #: 17-058316

Dear Sir or Madam:

The City of Saint Paul, Department of Safety and Inspections has inspected the above referenced property on **July 11, 2017** and has determined that the following deficiencies exist in violation of the Saint Paul Legislative Code¹ (see footnote 1, below).

1. Lack of Natural Gas Service. **Immediately restore natural gas service.** Failure to provide natural gas service will result in these premises being declared Unfit for Human Habitation and ordered vacated for lack of this basic facility.

You are hereby notified to correct these deficiencies in accordance with the appropriate codes. The Enforcement Officer will re-inspect these premises on **July 20, 2017**, by which date the violations noted must be corrected. **Failure to correct these deficiencies may result in the issuance of criminal charges²** and/or a civil lawsuit, and possible abatement/assessment by the City. All repairs and new installations must be made in accordance with the appropriate codes. Permits may be obtained by calling 651-266-8989.

You may file an appeal to this notice by contacting the City Clerk at 651-266-8585. Any appeal must be made in writing within 10 days of this notice. (You must submit a copy of this Notice when you appeal, and pay a filing fee.)

If you have any questions or request additional information, please contact me. To arrange an appointment or request an extension of time to complete repairs, you will need to speak directly to me at 651-266-1914.

Sincerely,

Sean Westenhofer
Badge # 330
CODE ENFORCEMENT OFFICER

Footnotes:

(Top 3 inches reserved for recording data)

STATUTORY SHORT FORM POWER OF ATTORNEY
MINNESOTA STATUTES, SECTION 523.23

Minnesota Uniform Conveyancing Blanks
Form 100.1.1 (2014)

STATUTORY SHORT FORM POWER OF ATTORNEY
MINNESOTA STATUTES, SECTION 523.23

Before completing and signing this form, the principal must read and initial the IMPORTANT NOTICE TO PRINCIPAL that appears after the signature lines in this form. Before acting on behalf of the principal, the attorney(s)-in-fact must sign this form acknowledging having read and understood the IMPORTANT NOTICE TO ATTORNEY(S)-IN-FACT that appears after the notice to the principal.

PRINCIPAL (Name and Address of Person Granting the Power)

Prontiss Hamilton
686 Telegraph Ave
Saint Paul, MN 55104

ATTORNEY(S)-IN-FACT
(Name and Address)

Prontiss Charnette Hamilton
686 Telegraph Ave
St. Paul, MN 55104

SUCCESSOR ATTORNEY(S)-IN-FACT (Optional).

To act if any named attorney-in-fact dies, resigns, or is otherwise unable to serve

(Name and Address)
First Successor Prontiss Charnette Hamilton
686 Telegraph Avenue
Saint Paul, MN 55104

Second Successor _____

NOTICE: If more than one attorney-in-fact is designated to act at the same time, make a check or "x" on the line in front of one of the following statements:

- ☐ Each attorney-in-fact may independently exercise the powers granted.
☐ All attorneys-in-fact must jointly exercise the powers granted.

EXPIRATION DATE (Optional)

Use Specific Month

Day

Year Only

I (the above named Principal) appoint the above named Attorney(s)-in-Fact to act as my attorney(s)-in-fact:

FIRST: To act for me in any way that I could act with respect to the following matters, as each of them is defined in Minnesota Statutes, section 523.24:

(To grant to the attorney-in-fact any of the following powers, make a check or "x" on the line in front of each power being granted. You may, but need not, cross out each power not granted. Failure to make a check or "x" on the line in front of the power will have the effect of deleting the power unless the line in front of the power of (N) is checked or "x"-ed.)

Check or "x"

☒ (A) real property transactions;
I choose to limit this power to real property in Ramsey County, Minnesota, described as follows: (Use legal description. Do not use street address.)

(If more space is needed, continue on the back or on an attachment.)

- ☒ (B) tangible personal property transactions;
- ☒ (C) bond, share, and commodity transactions;
- ☒ (D) banking transactions;
- ☒ (E) business operating transactions;
- ☒ (F) insurance transactions;
- ☒ (G) beneficiary transactions;
- ☒ (H) gift transactions;
- ☒ (I) fiduciary transactions;
- ☒ (J) claims and litigation;
- ☒ (K) family maintenance;
- ☒ (L) benefits from military service;
- ☒ (M) records, reports, and statements;
- ☒ (N) all of the powers listed in (A) through (M) above and all other matters, other than health care decisions under a health care directive that complies with Minnesota Statutes, chapter 145C.

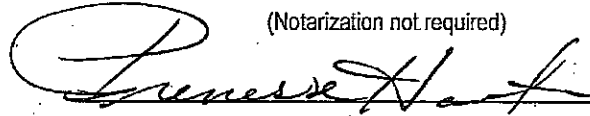
SECOND: (You must indicate below whether or not this Power of Attorney will be effective if you become incapacitated or incompetent. Make a check or "x" on the line in front of the statement that expresses your intent.)

- ☒ This power of attorney shall continue to be effective if I become incapacitated or incompetent.
- ☐ This power of attorney shall not be effective if I become incapacitated or incompetent.

**ACKNOWLEDGEMENT OF NOTICE TO ATTORNEY(S)-IN-FACT
AND SPECIMEN SIGNATURE OF ATTORNEY(S)-IN-FACT.**

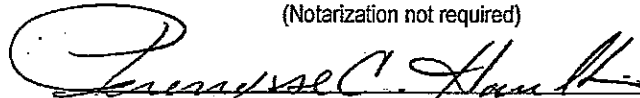
By signing below, I acknowledge I have read and understand the IMPORTANT NOTICE TO ATTORNEY(S)-IN-FACT required by Minnesota Statutes, section 523.23, and understand and accept the scope of any limitations to the powers and duties delegated to me by this instrument.

(Notarization not required)



THIS INSTRUMENT WAS DRAFTED BY:
(insert name and address)

Specimen signature of Attorney(s)-in-Fact
(Notarization not required)



686 Togliatti Ave
St Paul, MN 55104

IMPORTANT NOTICE TO THE PRINCIPAL

READ THIS NOTICE CAREFULLY. The power of attorney form that you will be signing is a legal document. It is governed by Minnesota Statutes, chapter 523. If there is anything about this form that you do not understand, you should seek legal advice.

PURPOSE: The purpose of the power of attorney is for you, the principal, to give broad and sweeping powers to your attorney(s)-in-fact, who is the person you designate to handle your affairs. Any action taken by your attorney(s)-in-fact pursuant to the powers you designate in this power of attorney form binds you, your heirs and assigns, and the representative of your estate in the same manner as though you took the action yourself.

POWERS GIVEN: You will be granting the attorney(s)-in-fact power to enter into transactions relating to any of your real or personal property, even without your consent or any advance notice to you. The powers granted to the attorney(s)-in-fact are broad and not supervised. **THIS POWER OF ATTORNEY DOES NOT GRANT ANY POWERS TO MAKE HEALTH CARE DECISIONS FOR YOU. TO GIVE SOMEONE THOSE POWERS, YOU MUST USE A HEALTH CARE DIRECTIVE THAT COMPLIES WITH MINNESOTA STATUTES, CHAPTER 145C.**

DUTIES OF YOUR ATTORNEY(S)-IN-FACT: Your attorney(s)-in-fact must keep complete records of all transactions entered into on your behalf. You may request that your attorney(s)-in-fact provide you or someone else that you designate a periodic accounting, which is a written statement that gives reasonable notice of all transactions entered into on your behalf. Your attorney(s)-in-fact must also render an accounting if the attorney-in-fact reimburses himself or herself for any expenditure they made on behalf of you. An attorney-in-fact is personally liable to any person, including you, who is injured by an action taken by an attorney-in-fact in bad faith under the power of attorney or by an attorney-in-fact's failure to account when the attorney-in-fact has a duty to account under this section. The attorney(s)-in-fact must act with your interests utmost in mind.

TERMINATION: If you choose, your attorney(s)-in-fact may exercise these powers throughout your lifetime, both before and after you become incapacitated. However, a court can take away the powers of your attorney(s)-in-fact because of improper acts. You may also revoke this power of attorney if you wish. This power of attorney is automatically terminated if the power is granted to your spouse and proceedings are commenced for dissolution, legal separation, or annulment of your marriage. This power of attorney authorizes, but does not require, the attorney(s)-in-fact to act for you. You are not required to sign this power of attorney, but it will not take effect without your signature. You should not sign this power of attorney if you do not understand everything in it, and what your attorney(s)-in-fact will be able to do if you do sign it.

Please place your initials on the following line indicating you have read this IMPORTANT NOTICE TO THE PRINCIPAL: _____

IMPORTANT NOTICE TO THE ATTORNEY(S)-IN-FACT

You have been nominated by the principal to act as an attorney-in-fact. You are under no duty to exercise the authority granted by the power of attorney. However, when you do exercise any power conferred by the power of attorney, you must:

- (1) act with the interests of the principal utmost in mind;
- (2) exercise the power in the same manner as an ordinarily prudent person of discretion and intelligence would exercise in the management of the person's own affairs;
- (3) render accountings as directed by the principal or whenever you reimburse yourself for expenditures made on behalf of the principal;
- (4) act in good faith for the best interest of the principal, using due care, competence, and diligence;
- (5) cease acting on behalf of the principal if you learn of any event that terminates this power of attorney or terminates your authority under this power of attorney, such as revocation by the principal of the power of attorney, the death of the principal, or the commencement of proceedings for dissolution, separation, or annulment of your marriage to the principal;
- (6) disclose your identity as an attorney-in-fact whenever you act for the principal by signing in substantially the following manner:
Signature by a person as "attorney-in-fact for (name of the principal)" or "(name of the principal) by (name of the attorney-in-fact) the principal's attorney-in-fact";
- (7) acknowledge you have read and understood this IMPORTANT NOTICE TO THE ATTORNEY(S)-IN-FACT by signing the power of attorney form.

You are personally liable to any person, including the principal, who is injured by an action taken by you in bad faith under the power of attorney or by your failure to account when the duty to account has arisen.

The meaning of the powers granted to you is contained in Minnesota Statutes, chapter 523. If there is anything about this document or your duties that you do not understand, you should seek legal advice.