

Vang, Mai (CI-StPaul)

From: Sheffer, Vicki (CI-StPaul)
Sent: Monday, March 23, 2020 3:04 PM
To: Vang, Mai (CI-StPaul)
Subject: FW: Vacant Building Registration Form for 1286 Sherburne Ave
Attachments: VBRF 1286 Sherburne Ave 3-16-20.pdf

See below and the attached VBRF.

From: Sheffer, Vicki (CI-StPaul)
Sent: Monday, March 23, 2020 2:56 PM
To: Erick Flyckt <Erick@uwilllaw.com>
Cc: Magner, Steve (CI-StPaul) <steve.magner@ci.stpaul.mn.us>
Subject: Vacant Building Registration Form for 1286 Sherburne Ave

Hello Erick Flyckt –

DSI received the attached form from Xome Field Services which shows a change of ownership for this property. They also submitted a check for the registration fee which is not due at this time; the check is being returned. Has ownership of this property transferred prior to the building obtaining a certificate of code compliance? Please advise. Thank you.

Vicki



Vicki Sheffer

TISH Program Manager

Dept. of Safety & Inspections

375 Jackson Street Suite 220

Saint Paul, MN 55101

P: 651-266-1935

vicki.sheffer@ci.stpaul.mn.us

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City in America



DSI's Mission: To preserve and improve the quality of life in Saint Paul by protecting and promoting public health and safety for all.

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

Date: 03/16/2020

Address of Property: 1286 SHERBURNE AVE SAINT PAUL MN 55104

Planned disposition of this building (please check one):

- I plan to rehabilitate this structure commencing (date): ASAP
- 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: _____

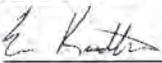
Responsible Party: Persons/organizations who will ensure compliance with the ordinance:

NAME	ADDRESS	PRIMARY PHONE	ALTERNATE PHONE
Xome Field Services	13640 Briarwick Dr., Ste. 200, Austin, TX 78729	800-468-1743	

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

NAME	ADDRESS	PRIMARY PHONE	ALTERNATE PHONE
Mr. Cooper	350 Highland Dr, Lewisville TX 75067	800-468-1743	

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

<p>Eric Knudtson</p> <hr/> <p>Print Your Name (legibly)</p>  <hr/> <p>Signature</p> <p><u>13640 Briarwick Dr., Ste. 200</u></p> <hr/> <p>Address</p> <table style="width:100%"> <tr> <td>Austin</td> <td>TX</td> <td>78729</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> </table> <hr/> <p>800-468-1743 N/A</p> <hr/> <p>main contact telephone alternate phone</p> <hr/> <p>XFSVPR@xome.com</p> <hr/> <p>Email address (print legibly)</p>	Austin	TX	78729	City	State	Zip	<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 align="center">Thank you for your cooperation</p>
Austin	TX	78729					
City	State	Zip					

Please forward all notices/confirmations to XFSVPR@xome.com,
 13640 Briarwick Dr, Ste. 200, Austin, TX 78729, 800-468-1743.