

**39. Smoke detector Information:**

Smoke detectors(s) Y  
Properly located Y  
\*Hard-Wired \* Y  
\*If N or H see note on p.3, item 39

**Disclosure Report**  
**Saint Paul Truth-in-Sale of Housing**  
(Carefully read this entire report)

**Office Use, ONLY**

Date Received \_\_\_\_\_  
Payment Ref. \_\_\_\_\_

**THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.**

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

**Address of Evaluated Dwelling:** 2121 Reaney Ave St Paul, MN 55119  
Addresses without the correct street type and/or direction may be returned and may incur a late fee.

**Owner's Name:** Gretchen Ewald

**Owner's Address:** same

**Current USAGE of this dwelling:**  **Single Family**  **Townhouse**  **Condo\***  
 **Duplex**  **Other:** \_\_\_\_\_  
Usage may not be legal. See below.

\*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

**Comments:**

Single Family

**PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION**

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of Saint Paul.

According to information provided to Truth-In-Sale of Housing Evaluators by the City of Saint Paul this property:

\*  **IS A REGISTERED VACANT BUILDING. The conditions applicable to a sale are different by Category:**  
Even if this box is not marked this dwelling may BECOME a vacant building before the 1 year expiration date of this report.  
**Cat. 1 \_\_\_\_\_:** New owners must re-register the building and pay all outstanding fees and obtain permission for occupancy.  
**Written permission from the City of Saint Paul is required before a Cat 2 or Cat 3 VB can be sold.**  
**Cat. 2 \_\_\_\_\_:** Requirements include: 1. Register/re-register the building, 2. Pay outstanding fees, 3. Obtain a code compliance report, 4. Submit for approval a rehab cost estimate from a licensed contractor and a schedule for completion of all code compliance work, 5. Submit proof of financial responsibility acceptable to the City.  
**Cat. 3 \_\_\_\_\_:** All above requirements AND obtain a CERTIFICATE OF OCCUPANCY or CERTIFICATE OF CODE COMPLIANCE before sale.  
**\*NOTICE:** A VB status and/or category can change at any time. You must contact the City's Vacant Buildings division at 651-266-1900 to be sure you are fully informed of all conditions and requirements that may affect the sale of this property.

**IS** located within a Saint Paul HERITAGE PRESERVATION DISTRICT or is individually designated as a Saint Paul Heritage Preservation site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation call the City's Information line at 651-266-8989

**HAS** OPEN PERMITS. Go to the DSI website (see below), click on 'Look Up Property Information' to view information. Completion and/or occupancy restrictions or requirements may apply. Call 651-266-9090 for permit information.

**IS** a VERIFIED LEGAL DUPLEX. If this dwelling is in use as a duplex and this box is NOT checked, contact DSI ZONING at 651-266-9008 for the most recent information. Research into a property's history may incur a fee.

You may obtain a printout of all this information by visiting the DSI website, then enter the property address as directed: [www.stpaul.gov](http://www.stpaul.gov)>Government>Department of Safety & Inspections, then click on 'Look Up Property Information'

**This Report:**

1. is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for a hard-wired smoke detectors.
2. is based on the current Truth-in-Sale of Housing Evaluator Guidelines and is based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
3. is not warranted, by the City of Saint Paul nor by the evaluator for the condition of the building component, nor of the accuracy of this report.
4. covers only the items listed on the form and only those items **visible at the time of the evaluation.** The Evaluator is not required to operate the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
5. is valid for one year from the date of issue and only for the owner named on this report.

**Questions regarding this report should be directed to the evaluator. Complaints regarding this report should be directed to Department of Safety and Inspections, Truth-in-Sale of Housing Program, Phone No. (651) 266-1900.**

EVALUATOR: Jon Haven PHONE: (651) 641-0641 DATE: 9/28/2009 Rev 3/2009

Property Address: 2121 Reaney Ave St Paul, MN 55119

Rating Key: M = Meets minimum B = Below minimum C = See Comment H = Hazardous Y = Yes N = No NV = Not Visible/Viewed NA = Not Applicable

Item # Comment
Specify location(s), where necessary

BASEMENT/CELLAR

- 1. Stairs and Handrails B
2. Basement/cellar floor C
3. Foundation C
4. Evidence of dampness or staining Y
5. First floor, floor system C
6. Beams and columns C

ELECTRICAL SERVICE(S) # of Services 1

7. Service size:
Amps: 30 60 100 150 Other 200
Volts: 115 115/220

BASMENT or METER LOCATION(S) ONLY:

- 8. Electrical service installation/grounding B
9. Electrical wiring, outlets, and fixtures M

PLUMBING SYSTEM

- 10. Floor drain(s) (basement) M
11. Waste and vent piping (all floors) C
12. Water piping (all floors) B
13. Gas piping (all floors) B
14. Water heater(s), installation B
15. Water heater(s), venting B
16. Plumbing fixtures (basement) B

HEATING SYSTEM(S) # of 1

- 17. Heating plant(s): Type: Forced air Fuel: Gas
a. Installation and visible condition M
b. Viewed in operation (required in heating season) N
c. Combustion venting M

The Evaluator is NOT required to operate the heating plant(s), except during heating season, between October 15 and April 15.

- 18. Additional heading unit(s) Type: Fuel:
a. Installation and visible condition
b. Viewed in operation
c. Combustion venting

19. ADDITIONAL COMMENTS (1 through 18)

- 1. Low headroom. Handrails fail to return to walls at ends.
2. Finished portions not visible.
3. Finished portions not visible.
4. Efflorescence, Stains on foundation walls. decayed wood in contact with floor
5. Finished portions not visible
6. Covered portions not visible
8. Circuits not all indexed. [B]
11. limited view of waste pipes.
12. Corroded, weeping piping at water heater. Saddles on water supply to washer. Lacks backflow valves on exterior faucets. Corroded, leaking pipe above laundry
13. Unapproved gas valve in use at dryer and kitchen basement stove. Flexible brass connector on gas line to basement kitchen stove.
14. Temp/pressure valve lacks discharge pipe [B]
15. Does not join furnace vent at a 45 degree. [B]
16. Laundry tub faucet lacks a backflow valve on threaded faucet.

EVALUATOR: Jon Haven

DATE: 9/28/2009

**Item #      Comment**

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

**KITCHEN**

20. Walls and ceiling .....	<u>      M      </u>
21. Floor condition and ceiling height .....	<u>      M      </u>
22. Evidence of dampness or staining .....	<u>      Y      </u>
23. Electrical outlets and fixtures .....	<u>      M      </u>
24. Plumbing fixtures .....	<u>      B      </u>
25. Water flow .....	<u>      M      </u>
26. Window size/openable area/mechanical exhaust .....	<u>      B      </u>
27. Condition of windows/doors/mech. exhaust .....	<u>      B      </u>

**LIVING AND DINING ROOM(S)**

28. Walls and ceiling .....	<u>      M      </u>
29. Floor condition and ceiling height .....	<u>      M      </u>
30. Evidence of dampness or staining .....	<u>      N      </u>
31. Electrical outlets and fixtures .....	<u>      M      </u>
32. Window size and openable area .....	<u>      M      </u>
33. Window and door condition .....	<u>      M      </u>

**HALLWAYS, STAIRS AND ENTRIES**

34. Walls, ceilings, floors .....	<u>      M      </u>
35. Evidence of dampness or staining .....	<u>      N      </u>
36. Stairs and handrails to upper floors .....	<u>      M      </u>
37. Electrical outlets and fixtures .....	<u>      M      </u>
38. Window and door condition .....	<u>      M      </u>
39. Smoke detector(s) .....	<u>      Y      </u>
Properly located .....	<u>      Y      </u>
* Hard-Wired (HWSD) .....	<u>      Y      </u>

\* if N or H in SINGLE FAMILY HOME the SPFire Dept requires HWSD installation

**BATHROOM(S)**

40. Walls and ceilings .....	<u>      M      </u>
41. Floor condition and ceiling height .....	<u>      M      </u>
42. Evidence of dampness or staining .....	<u>      N      </u>
43. Electrical outlets and fixtures .....	<u>      M      </u>
44. Plumbing .....	<u>      B      </u>
45. Water flow .....	<u>      M      </u>
46. Window size/openable area/mechanical exhaust .....	<u>      M      </u>
47. Condition of windows/doors/mech. exhaust .....	<u>      M      </u>

**SLEEPING ROOM(S)**

48. Walls and ceilings .....	<u>      M      </u>
49. Floor condition and ceiling height .....	<u>      M      </u>
50. Evidence of dampness or staining .....	<u>      N      </u>
51. Electrical outlets and fixtures .....	<u>      M      </u>
52. Window size and openable area .....	<u>      B      </u>
53. Window and door condition .....	<u>      M      </u>

**ENCLOSED PORCHES AND OTHER ROOMS**

54. Walls, ceiling, and floor condition .....	<u>      M      </u>
55. Evidence of dampness or staining .....	<u>      Y      </u>
56. Electrical outlets and fixtures .....	<u>      M      </u>
57. Window and door condition .....	<u>      M      </u>

**ATTIC SPACE (Visible Areas)**

58. Roof boards and rafters .....	<u>      C      </u>
59. Evidence of dampness or staining .....	<u>      Y      </u>
60. Electrical wiring/outlets/fixtures .....	<u>      NV      </u>
61. Ventilation .....	<u>      NV      </u>

**62. ADDITIONAL COMMENTS (20 through 61)**

CO Detector information reported here

22. Stained baseboard on west wall in basement kitchen.
24. Kitchen sink drain not vented. s-trap in basement kitchen
26. Top sashes painted shut, basement kitchen
27. Sash cords broken, basement kitchen
44. Sink cracked, 1st floor
52. windows lack egress requirements for sleeping room. (minimum net glazed opening of 5.7 square feet with minimum net clear opening height of 24 inches and minimum width of 20 inches and maximum finished sill height of not more than 48 inches above the floor.) in basement bedroom.
55. Rear porch ceiling stained
58. -61. Access to attic sealed, not evaluated.
59. Stains in NE
62. 62H; CO detectors not installed to state guidelines.

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**EXTERIOR (Visible Areas)**

63. Foundation .....	C
64. Basement/cellar windows .....	C
65. Drainage (grade) .....	M
66. Exterior walls .....	M
67. Doors (frames/storms/screens) .....	B
68. Windows (frames/storms/screens) .....	M
69. Open porches, stairways and decks .....	M
70. Cornice and trim .....	M
71. Roof structure and covering .....	M
72. Gutters and downspouts .....	M
73. Chimneys .....	M
74. Outlets, fixtures and service entrance .....	M

**Item #      Comment**

- 63. Random loose mortar in brick
- 64. Landscape material window frames on east.
- 67. Lacks a 1 inch deadbolt lock on basement exterior doors.
- 75. Sagging roofline.
- 76. Decayed wall components on west. Sidings in contact with soils. Lacks house numbers on alley side.
- 77. Garage floor cracked, settled, offset. Grease pit in floor.
- 80. Ungrounded 3-prong outlets. 30 amp fuses in use. over fusing. Non s-type fuses in sub panel. Exposed wire splices in service wires from house garage.

**GARAGE(S)/ACCESSORY STRUCTURE(S)**

75. Roof structure and covering .....	C
76. Wall structure and covering .....	B
77. Slab condition .....	B
78. Garage door(s) .....	M
79. Garage opener(s) - (see important notice #6) .....	M
80. Electrical wiring, outlets and fixtures .....	H

84. Missing mortar in fireplace

**81. ADDITIONAL COMMENTS (63 through 80)**

**FIREPLACE/WOODSTOVES**

82. Dampers installed in fireplaces .....	Y
83. Installation .....	M
84. Condition .....	B

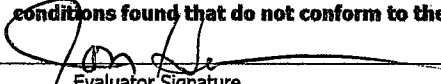
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**SUPPLEMENTAL INFORMATION - No determination is made whether items meet minimum standards (Y/N, NA, NV, only)**

INSULATION	Y/N	Type	Inches/Depth
85. Attic Insulation	NV	_____	_____
86. Foundation Insulation	NV	_____	_____
87. Knee Wall Insulation	NV	_____	_____
88. Rim Joist Insulation	NV	_____	_____

**89. ADDITIONAL COMMENTS (82 through 88)**

**I hereby certify I prepared this report in compliance with the Saint Paul Evaluator Guidelines and all other applicable policies and procedures of the Truth-in-Sale of Housing Board. I have utilized reasonable and ordinary care and diligence and I have noted all conditions found that do not conform to the minimum standards of maintenance.**

  
Evaluator Signature

(651) 641-0641  
Phone Number

9/28/2009  
Date

Printed Name: Jon Haven

**IMPORTANT NOTICES**

1. All single family residences in Saint Paul must have at least one smoke detector connected to the electrical system (hard-wired). The detector must be located near sleeping rooms. For more information call Fire Prevention, (651) 266-9090. (Saint Paul Legislative Code, Chapter 58.)
2. Rainleaders connected to the sanitary sewer system must be disconnected. For more information call Public Works, Sewer Utility, (651) 266-6234.
3. A house built before 1978 may have lead paint on/in it. If children ingest lead paint, they can be poisoned. For more information call Ramsey County Public Health, (651) 266-1199.
4. Neither the City of Saint Paul nor the Evaluator is responsible for the determination of the presence of airborne particles such as asbestos, noxious gases such as radon, or other conditions of air quality that may be present, nor the conditions which may cause the above.
5. If this building is used for any purpose other than a single family dwelling, it may be illegally zoned. To help you determine legal uses under the zoning ordinance, contact the Zoning Administrator at (651) 266-9008.
6. An automatic garage door should reverse upon striking an object. If it does not reverse it poses a serious hazard and should be immediately repaired or replaced.