


COMPLAINT

State of Minnesota		Ramsey District Court <u>Housing</u>	
City of <u>St Paul</u>		 * 9 1 0 1 5 1 9 4 5 *	
Citation # 910 151945			
DL Number	<u>K 741179738 112</u>	State	<u>MN</u> <input checked="" type="checkbox"/> MN <input type="checkbox"/> CDL
Name First Middle Last	<u>Timothy David Gordon</u>		
Address - Street, Apt #	<u>591 Clifford St.</u>		
City	<u>St Paul</u>	State	<u>MN</u> Zip <u>55104</u>
DOB (mm/dd/yyyy)	Eyes	Height	Weight
<u>10/23/1945</u>			<u>M</u>
Sex	Race	Ethnicity	
Vehicle License No.	Plate Year	State	Make
Date of Offense	Time of Offense	Accident	
<u>12/8/10</u>	<u>1325</u>	<input type="checkbox"/> Injury <input type="checkbox"/> Pedestrian <input type="checkbox"/> Property <input type="checkbox"/> Fatal	
Parking Meter Number	Neighborhood Code	<input checked="" type="checkbox"/> Housing/Building Code	
<input type="checkbox"/> Booked <input type="checkbox"/> Park/Operate <input type="checkbox"/> Owner <input type="checkbox"/> Passenger <input type="checkbox"/> Driver			
Offense Location <u>591 Clifford St.</u>			
No 1 Offense	<u>Failure to maintain exterior structure</u>	Statute/Ordinance <u>34.09 (1-3)</u>	
No 2 Offense		Statute/Ordinance	
No 3 Offense		Statute/Ordinance	
<input type="checkbox"/> Speed MS169.14 (subd _____): _____ mph _____ zone <input type="checkbox"/> No Seat Belt Use 169.686 (Subd.1.a _____) <input type="checkbox"/> No Proof of Insurance 169.791(2)			
<input type="checkbox"/> Hazardous Material (DOT) <input type="checkbox"/> Unsafe Conditions <input type="checkbox"/> School Zone <input type="checkbox"/> Endangering Life & Property <input type="checkbox"/> Work Zone <input type="checkbox"/> Commercial Veh. DOT # _____			
Identification: <input type="checkbox"/> DL <input type="checkbox"/> DVS Web <input type="checkbox"/> Photo ID <input type="checkbox"/> Other			
PROBABLE CAUSE STATEMENT: The COMPLAINANT being duly sworn, makes complaint to the above named Court that the facts stated below establish probable cause to believe that the Defendant committed the offense described above.			
<u>RC owner issued orders to correct exterior violations on the house on 7-7-08 and 9-21-10</u> <u>owner issued EC's on 10-3-08, 12-9-08, 10-22-09 and 2-3-10. Owner issued a tag on 8-4-09.</u> <u>Despite all of the orders, EC's and tag, owner is still in non-compliance. Photos taken for tag.</u>			
Officer(s) Name(s)	<u>Edward Smith</u>		
Officer No(s)	<u>325</u>	CN#	Citing Dept <u>DSI</u>

COURT

VIOLATION INFORMATION/PROBABLE CAUSE

(Every area must be completed)

Supervisor	
Manager	
Director	

VIOLATION DATA

Tag Number: 910-151945	Issued Date: 12-8-10
Violator Name: Timothy David Gordon	Pictures (X) YES (X) NO () ATTACHED (X)
Violation Address: 591 CLIFFORD ST	CFO Key:
Violation of Code Section: 34.09 (1-3)	Date of Violation: 12-8-10
Violation: (Failure to....) maintain exterior structure: walls, windows, doors, roof, fascia, window frames, door frames, sill plates, flooring and exposed electrical service.	

OWNER AGENT VIOLATOR VERIFICATION (Place an "X" by one)

Owner/Agent/Violator: Timothy David Gordon	D.O.B. 10-23-1945
Owners Address, City, State, Zip: 591 Clifford St, St Paul, MN 55104	
How Do You Know? RCPT, STAMP and AMANDA	
Tax Record (yes or no): Yes	
Address, City, State, Zip: 591 Clifford St, St Paul, MN 55104	
Agent:	D.O.B.
Agents Address, City, State, Zip:	
Agent Relationship to Owner:	

PREVIOUS ORDERS – DATE/TIME – REASON –TO WHOM

Orders were issued to RC owner on 7-7-08 and 9-21-10 to correct exterior violations on the exterior of the house. RC owner was issued EC's on 10-3-08, 12-9-08, 10-22-09 and 2-3-10 for being in non-compliance. RC owner was issued a tag on 8-14-09 for non-compliance.

Officer Notes (at the bottom of the citation)

RC owner was issued orders to correct exterior violations on the house on 7-7-08 and 9-21-10. Owner was issued EC's on 10-3-08, 12-9-08, 10-22-09 and 2-3-10. Owner issued a tag on 8-14-09. Despite all of the orders, EC's and tag, owner is still in non-compliance. Photos taken for tag.

DESIRED DISPOSITION: Fine and compliance

INSPECTORS STATEMENT ON BACK

INSPECTOR'S NAME: Ed Smith

PHONE #: 651-266-1917

DIVISION Department of Safety and Inspections, Code Enforcement

Back

ISSUING INSPECTORS STATEMENT (Tell the story of why the tag is being issued)

RC owner has been issued multiple orders, EC's and a tag, but has still not come into compliance. Some of the issues with the house have the potential to be a serious health/safety hazard (i.e. the rotting sill plate and flooring on the west entryway, the exposed electrical service in the backyard) and need to be dealt with quickly.



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

December 9, 2010

Timothy D Gordon
591 Clifford St
St Paul MN 55104-4907

NOTICE

Property Address: **591 CLIFFORD ST**

The City of Saint Paul Department of Safety and Inspections, Division of Code Enforcement, has issued summons number(s) **910-151945**, in which you have been charged with violation of the Saint Paul Legislative Code. This citation will be heard in the Ramsey County Housing Court. The Court Clerk will notify you by mail as to the date, time and place to appear. If you have not heard from the Court Clerk at the end of four weeks, contact the Housing Court Clerk at (651) 266-8230.

The issuance of this citation(s) does not negate any other enforcement action which the City may have instituted or which the City may institute in the future.

If you fail to answer this citation in the manner directed by the Court, a warrant will be issued for your arrest.

c: Property Address

es

tag60105 2/10

Defendant's name
City Attorney file #
Date of Offense
Arrestment Date
Inspector name & Dept.

Address of Violation
Type of Offense
Citation #
Prosecutor

Gordon, Timothy David 591 Clifford St
11-252705 EXTERIOR
12/8/2010 910151945
1/20/2011 Meghan Kisch
Ed Smith

	Statute/Ordinance #	Offense
Count I	<u>34.09</u>	<u>fail to maintain road. Street.</u>
Count II	_____	_____
Count III	_____	_____

Appearance by Defendant (circle/date) Yes X No _____

Case Disposition (circle/date) PG PG/SI CFD ATSP DISM DECLINE

Sentence/Conditions:

- No same or similar offenses St. Paul Legislative Code 34.09
- Pay \$ 50⁺ (\$132)
- COMPLY BY*** See Below REINSPECT: YES X NO _____
(Date(s) to recheck property)

ITEMS TO BE DONE AT PROPERTY TO BRING IT INTO CODE COMPLIANCE:

- Replace west entryway door by Feb. 10th, 2011
 - Fix exposed electrical by Feb. 10th, 2011
 - Replace / Demolish west stoop by May 1st, 2011
 - Paint and replace missing siding by May 1st, 2011
- ***CONTACT City Attorney's office if work not done by compliance date***

NOTES: _____

