

CITY OF SAINT PAUL
INTERDEPARTMENTAL MEMORANDUM

EGRESS WINDOW NON-COMPLIANCE DETERMINATION

LH: 6-12-12

1:30 P.M.

TO: CITY CLERK

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

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

Faxed 5-29-12
by LJ

DATE: 5-29-12

APPEAL PROPERTY ADDRESS: 266 STINSON STREET

APPLICANT NAME: PUSSELL HEALTT (DANIEL SCHEMLOT) PHONE NUMBER: 651-266-1143

PERMIT NUMBER: _____

TYPE OF WINDOW: DOUBLE-HUNG (VINYL)

NUMBER OF WINDOWS: 2

TOTAL GLAZED AREA: 8.68 sqft DIFFERENCE FROM REQUIRED AREA: COMP

WIDTH OF OPENING: 24" DIFFERENCE FROM REQUIRED OPENING: COMP

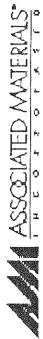
HEIGHT OF OPENING: 19.93 DIFFERENCE FROM REQUIRED OPENING: 4.07"

HEIGHT OF OPENING TO FINISHED FLOOR: 248" DIFFERENCE FROM MAXIMUM HEIGHT: COMP

RECOMMENDATION (IF APPLICABLE): _____

FROM: _____

266 Stinson



Select a Model
 (Model 0201)
 Escalibur Double Hung

Min. W: 11 Max. W: 12
 Min. H: 20 Max. H: 84
 Max. U: 132

Width: 28.5
 Height: 53.325
 Egress Size: 28.5
 53.325

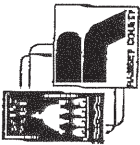
Enter in: Select Extension
 Opening: Best Size
 Type: Standard
 Screen: Full
 Glass: 30446 Strength (0 mm)

AC Sash On Right

Top Sash Width	28.2910
Top Sash Height	28.1250
Bottom Sash Width	28.2910
Bottom Sash Height	28.0750
Top Glass Width	21.8829
Top Glass Height	21.4175
Bottom Glass Width	21.8829
Bottom Glass Height	21.0150
Screen Width	24.8138
Screen Height	50.4375
Top Sash Weight (Plus 5 lb)	20 lb
Top Balance Size (C.F.)	10PK
Top Balance Size (Sq. Ft.)	21.75
Bottom Sash Weight	17 lb
Bottom Balance Size (C.F.)	9M1
Bottom Balance Size (Sq. Ft.)	25.48
Egress Opening Width	24.0340
Egress Opening Height	19.9375
Egress Opening Area (sq. ft.)	3.390

Scanned

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: 6-12-12 6:30 p.m.

FACSIMILE TRANSMISSION
Cover Sheet and Transmittal Form.

RECEIVED
MAY 29 2012
CITY CLERK

To FAX#: 6-8574

To: Mai Yang Paralegal

Location: Legislative Hearing Office
City of St. Paul

Sender: Daniel Schmidt / Jim Mannorelly
St. Paul - Ramsey Cty. Dept. of Public Health

This transmission consists of _____ 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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