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CITY OF SAINT PAUL
INTERDEPARTMENTAL MEMORANDUM

RECEIVED

OCT 12 2011

CITY CLERK

P. 2

No. 8724

EGRESS WINDOW NON-COMPLIANCE DETERMINATION

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

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

DATE: 10-12-11

APPEAL PROPERTY ADDRESS: 1171 DALE ST

APPLICANT NAME: PUBLIC HEALTH (DANIEL) PHONE NUMBER: 266-1143
ON BEHALF OF MOHAMED OSMAN

PERMIT NUMBER: _____

TYPE OF WINDOW: Vinyl

NUMBER OF WINDOWS: 2

TOTAL GLAZED AREA: 6.9 sq ft DIFFERENCE FROM REQUIRED AREA: COMPLIES

WIDTH OF OPENING: 19" DIFFERENCE FROM REQUIRED OPENING: 1"

HEIGHT OF OPENING: 20" DIFFERENCE FROM REQUIRED OPENING: 4"

HEIGHT OF OPENING
TO FINISHED FLOOR: 48" DIFFERENCE FROM MAXIMUM HEIGHT: COMPLIES

RECOMMENDATION (IF APPLICABLE): _____

Oct. 12, 2011, 3:13PM

FROM: _____

No. 8724 P. 3

Oct. 12. 2011 3:13PM St Paul-Ramsey Co. Public Health

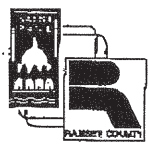
Select a Model

(Model D201) Excalibur Double Hung		0201		Min. W: 11	Max W: 12	
				Min. H: 20	Max H: 64	Max U/I: 132
Top Sash Width	20.5000	Exact Size Width: 23.75 23.75 Height: 53.625 53.625				
Top Sash Height	25.2600					
Bottom Sash Width	21.5000					
Bottom Sash Height	26.2500					
Top Glass Width	18.8125	Extrusion: Select Extrusion Opening: Exact Size Type: Standard Screen: Full Glass: Double Strength (3 mm)				
Top Glass Height	23.8025					
Bottom Glass Width	19.3125					
Bottom Glass Height	24.8825					
Screen Width	20.0625	<< For Arch-Top Models Only				
Screen Height	60.7500					
Top Sash Weight (Plus 4 lb)	17 lb					
Top Balance Size (C.F.)	9NAT					
Top Balance Size (Spiral)	21-7R	AC Sash Calculator				
Bottom Sash Weight	14 lb					
Bottom Balance Size (C.F.)	7GN					
Bottom Balance Size (Spiral)	25-8R					
Egress Opening Width	19.3440					
Egress Opening Height	20.6625					
Egress Opening Area (sq.ft.)	2.6950					

* $20 \times 50.7 = 1014 \div 144 = 7.04 \text{ sq ft}$

10-25-11
1:30

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St Paul-Ramsey Co. Public Health
3:13PM
Oct. 12, 2011



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: 9-23-11

To FAX#: 6-8574

FACSIMILE TRANSMISSION
Cover Sheet and Transmittal Form

To: Mai Yang, Paralegal
Location: Legislative Hearing Office
City of St. Paul
Sender: Daniel Schmidt / Tim Yannarelli
St. Paul - Ramsey Cty. Dept. of Public Health

This transmission consists of 3 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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