

APPLICATION FOR APPEAL

RECEIVED Paul City Council – Legislative Hearings

AUG 04 2015

CITY CI FRK

310 City Hall, 15 W. Kellogg Blvd. Saint Paul, Minnesota 55102 Telephone: (651) 266-8585

OIII Vimbel III					
We need the following to process your appeal:					
\$25 filing fee (non-refundable) (payable to the City of Saint Paul) (if cash: receipt number 494024 Copy of the City-issued orders/letter being appealed Attachments you may wish to include This appeal form completed Walk-In OR Mail-In for abatement orders only: Email OR Fax	HEARING DATE & TIME (provided by Legislative Hearing Office) Tuesday, August 18, 2015 Time 11:00 a.m Location of Hearing: Room 330 City Hall/Courthouse				
Address Being Appealed:					
Number & Street: 205 7th St. W. City: St.	Paul State: MN Zip: 55102				
Appellant/Applicant: Kaess Law LLC Ryan Kaess Em	ail Ryan Kaess C Kaessiaw. com				
Phone Numbers: Business 651-204-0963 Residence	Cell 6512838128				
	Date: 8 4/15				
Name of Owner (if other than Appellant): Kawaljit S. Rhatia Maharajas					
Mailing Address if Not Appellant's:					
Phone Numbers: Business 612 867 5740 Residence	Cell				
What Is Being Appealed and Why? Vacate Order/Condemnation/ Revocation of Fire C of O Summary/Vehicle Abatement Fire C of O Deficiency List/Correction Code Enforcement Correction Notice Vacant Building Registration	Attachments Are Acceptable				
Other (Fence Variance Code Compliance etc.)					



CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSPECTIONS DIVISION OF CODE ENFORCEMENT

15 - 144322

July 28, 2015

375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806

SUMMARY ABATEMENT ORDER

Yog tias koj tsis to taub tsab ntawv no, hu rau (651) 266-8989. Peb mam nhriav ib tug Hmoob los pab txhais Nws yuav pab dawb xwb.

• Si necessita un traductor, por favor llamanos al (651)266-8989. No costo.

Kawaljit S Bhatia/Maharajas 205 7th St W St Paul MN 55102-2520 Occupant 205 7TH ST W St. Paul, MN 55102-2520

	er or person(s) responsible for: 205 7TH ST W you are hereby ordered to eliminate all nuisance ons which are in violation of Chapter 45 of Saint Paul Legislative Code.
	Remove improperly stored or accumulated refuse including: garbage, rubbish, discarded furnitur appliances, vehicle parts, scrap wood and metal, recycling materials, household items, building materials or rubble, tires, brush, etc., from yard areas.
	Cut and remove tall grass, weeds and rank plant growth.
	Remove and properly dispose of all animal feces from yard areas.
	IMMEDIATELY secure all buildings which are open to unauthorized entry, including:
X	Other: Remove all graffiti on public sidewalk in front of this address. A waiver letter has been included with this notice.

If you do not correct the nuisance or file an appeal before August 04, 2015, the City will correct the nuisance and charge all costs, including boarding costs, against the property as a special assessment to be collected in the same way as property taxes.

Charges: If the City corrects the nuisance, the charges will include the cost of correction, inspection, travel time, equipment, etc. The rate will be approximately \$260.00 per hour plus expenses for abatement.

You must maintain the premises in a clean condition and provide proper and adequate refuse storage at all times FAILURE TO COMPLY MAY RESULT IN A CRIMINAL CITATION

Issued by: John Peter Ross Badge Number 320 Phone Number 651-266-1914

If you have any questions about this order, the requirements or the deadline, you should contact the Inspector listed above, Monday through Friday.

Appeals: You may appeal this order and obtain a hearing before the City Council by completing an appeal application with the City Clerk before the appeal deadline noted above or seven (7) days after the date mailed, whichever comes first. No appeals may be filed after that date. You may obtain an appeal application from the City Clerk's Office, Room 310, City Hall, St. Paul, MN 55102. The telephone number is (651) 266-8585. You must submit a copy of this Correction Order with your appeal application.

*WARNING Code inspection and enforcement trips cost the taxpayers money. If the violations are not corrected within the time period required in this notice, the city's costs in conducting a reinspection after the due date for compliance will be collected from the owner rather than being paid by the taxpayers of the city. If additional new violations are discovered within the next following 12 months, the city's costs in conducting additional inspections at this same location within such 12 months will be collected from the owner rather than being paid by the taxpayers of the city. Any such future costs will be collected by assessment against the real property and are in addition to any other fines or assessments which may be levied against you and your property.

Waiver and Consent to Remove or Abate Graffiti

I,		, am the owner or pe	rson responsible for the
property located at:			. I hereby
give permission for the City of	f Saint Paul, its ager	its or employees to r	emove, cover, paint or
otherwise eliminate graffiti on	the above described	I property. I underst	and that the process of
removing or covering over gra	iffiti cannot restore t	he damaged surface	to its original color or
appearance and may look diffe	erent than untouched	l areas. I understand	that by giving this
permission, I will hold harmle	ss the City of Saint	Paul, its employees o	or its agents for the final
appearance of my property. I	will further indemni	fy the City of Saint I	aul, its employees or its
agents for any claim or cause of	of action that may ar	ise from the removal	of graffiti on the property
stated above. I will notify the	City of Saint Paul if	/when the property o	hanges ownership.
This waiver will remain	n in full force and e	ffect until the City of	Saint Paul receives
written notice to terminate the	waiver and consent	to remove or abate g	raffiti.
Signature	.	Date	
S			
To avoid being charged for			
address below within 14 days			aspector or supervisor.
ı	Department of Safet Code Enfo		
	375 Jackson Str		
•	Saint Paul, MN		•
	•	******************	
	•		
Office Use Only	•	•	
Date Waiver Received		 .	
Shared/NHPI/HS/J/Forms/waiver form 2/ff	77.dec		