



Fire Inspection Report

City of Saint Paul

Department of Safety and Inspections
375 Jackson Street – Suite 220
Saint Paul MN 55101-1806

Owner Name Judith Day
Owner Address 1787 Sarbant ave
City State Zip St. Paul MN 55105
Owner Phone 651-269-9437

License _____

Complaint _____

C of O _____

Date _____

Building Address: 942/944 ashland

You are hereby notified to remedy the conditions stated below immediately. A reinspection will be made after the reinspection date stated below. If you consider any of these code requirements to be unreasonable, you may appeal to the Legislative Hearing Officer. Applications for appeals may be obtained at the City Clerks Office, 310 City Hall 651-266-8585 within 10 days of the date of the original orders.

Code	Conditions to be Corrected
	- unit 9 / scrape repaint hallway / Kitchen
	- unit 10 / repaint window sills
	- unit 10 / scrape repaint flaking paint
	- unit 10 / repair bedroom window
	- unit 10 / repair kitchen window
	- unit 11 / scrape repaint wall / Bedroom door
	- unit 11 / fire load Bedroom
	- clear electric panels - 36"
	- unit 12 / replace Bathroom ceiling tiles

Owner or Representative Signature _____

Occupancy Type _____

Inspector Signature KD / # 17

CFO Key _____

Reinspection Date Tue / Oct 7 / 1:00pm

** For further information on this report, contact the Fire Inspection Division at 651-266-8989 **



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License _____
Complaint _____
C of O _____
Date _____

Building Address: 934-940 ashland

You are hereby notified to remedy the conditions stated below immediately. A reinspection will be made after the reinspection date stated below. If you consider any of these code requirements to be unreasonable, you may appeal to the Legislative Hearing Officer. Applications for appeals may be obtained at the City Clerks Office, 310 City Hall 651-266-8585 within 10 days of the date of the original orders.

- repair Gypsum-Boiler room

Code	Conditions to be Corrected
934	- unit 1/scrape paint pipe bathroom
	- unit 1 bedroom / improper Bulbs
	- unit 3/Bedrm/window sill paint
	- unit 3 pantry / Scrape repaint
	- unit 4 - scrape repaint living room
	- unit 4 paint window sill
	- unit 4 scrape repaint Bedroom
	- unit 4, minimize fire load
Unit 5	- unit 5 / incense in wall
~~Unit 5~~	~~- unit 5 / replace kitchen sink plumbing / Good~~
	- remove cords unit 5

- remove 6-prong adapter unit 5

Owner or Representative Signature _____

Occupancy Type Unit 5

Inspector Signature KD / #17

CFO Key _____

Reinspection Date 9/4/25
10/7/25 1:00 PM

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License _____

Complaint _____

C of O _____

Date _____

Building Address: 934, 936, 940, 942, 944 Ashland

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Code	Conditions to be Corrected
	- Scrape and repaint all flaking exterior paint
	- pressure wash awnings
	- patch all foundation cracks
	- scrape/repaint any exterior flaking wall paint
	940 Back stairs condemned
	- fill all sidewalk cracks
	- repair laundry room window

Owner or Representative Signature _____

Occupancy Type _____ Inspector Signature KD / #17

CFO Key _____ Reinspection Date BEFORE 3/24

10/5/25 - 1:pm

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License _____
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Building Address: 938/940 Ashland

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Code	Conditions to be Corrected
	- Heat mandated at 68 degrees
	- unit 6 / scrape and repaint
	- unit 6 / repaint whole Bathroom
	- unit 6 / remove ac Bedroom window X2
	- unit 6 / tenant clean
	- unit 7 / patch paint Bedroom wall
	- hang SD unit 7 Bdrm X2
	- unit 7 patch trim over Kitchen door

Owner or Representative Signature _____

Occupancy Type _____ Inspector Signature K D #17
CFO Key _____ Reinspection Date 10/7/25 1:00 PM

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