

APPEAL APPLICATION FOR RENT STABILIZATION DETERMINATIONS



We need the following to process your appeal:

\$25 filing fee (non-refundable (payable to the

City of Saint Paul

X Copy of the Department of Safety & Inspections

Determination Letter

Attachments you may wish to include *attachments will be forthcoming XThis appeal form completed

Walk-In X Email **US Mail**

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<u>944 Ashlad Ave Apt 11</u> Number & Street & Unit Number (if appliable)

Appellant:

Samuel Perkins & Chloe Cable **Appellant Name**

Preferred Phone Number 614/2025

Signature & Today's Date

6/11/25

Property Owner (if other than appellant):

Judith Day **Property Owner Name**

Preferred Phone Number

Alternate Phone Number

Attachments Are Acceptable

What Is Being Appealed and Why?

Please see the attached cover letter.

I am represented in this matter by Housing Justice Center. Please direct communications to my attorneys: Jim Poradek (jporadek@hjcmn.org; 612-7233-0517) & Abbie Hanson (ahanson@hjcmn.org; 651-391-8393).

Saint Paul City Council - Rent Stabilization 310 City Hall, 15 W. Kellogg Blvd. Saint Paul, MN 55102 651-266-8568

HEARING			
(provided by	Rent Stabi	lization	Appeals Staff)
DATE:	July	17,	2025
TIME:	1:0	0 p	.m.
LOCATIO			
Room 330 S			LL C
15 West Kel	A CONTRACTOR OF		
Saint Paul, I	VIN 55102		

Saint Paul, MN	χ.	55104	
City & State		Zip Code	

ahanson@hjcmn.org (attorney)

Email

651-391-8393 (attorney) **Alternate Phone Number**

Tenant

Is Appellant: Property Owner/ Manager OR Tenant?

Email