## PUBLIC HEARING BOARD OF HOUSING QUALITY APPEALS CITY HALL McCLOSKEY CONFERENCE ROOM June 17, 2020 4:00 P.M.

#### ALL ITEMS ARE ON THE CONSENT AGENDA

- I. ROLL CALL
- II. REVIEW OF SUMMARY
- III. PETITIONS
  - 1) 19-TV-29, **802 N. College Avenue**, Linda Braunlin. Request for an extension of time to complete repairs.
  - 2) 20-TV-31, **520 W. Kirkwood Avenue**, Orion Management (Morrison Rentals). Request for an extension of time to complete repairs.
  - 3) 20-TV-38, **3643 E. Park Lane**, Claudia Avellaneda. Request for an extension of time to complete repairs.
  - 4) 20-AA-39, **231 N. Adams Street**, Crystal Sullivan. Request for relief from an administrative decision.
  - 5) 20-TV-40, **605 E. University Street**, Choice Realty. Request for an extension of time to complete repairs.
  - 6) 20-AA-41, **1802 N. Arlington Road**, Lois Faye McClung Revocable Trust. Request for relief from an administrative decision.
  - 7) 20-TV-42, **345 S. Curry Pike**, Mackie Properties (Citadel Investments Trust). Request for an extension of time to complete repairs.
  - 8) 20-TV-43, **405 S. Lincoln Street**, Kathy Duckett. Request for an extension of time to complete repairs.
- IV. **GENERAL DISCUSSION**
- V. PUBLIC COMMENT
- VI. **ADJOURNMENT**



#### **Board of Housing Quality Appeals** Staff Report: Petition for Extension of Time

Meeting Date:

17 June 2020

Petition Type:

An extension of time to complete repairs

Petition Number:

20-TV-019 (old business)

Address:

802 N College Ave

Petitioner:

Linda Braunlin

Inspector:

Michael Arnold

Staff Report:

13 September 2019

Cycle Inspection

24 September 2019

Sent Report

22 November 2019

Reinspection Scheduled

28 January 2020

Reinspection

28 January 2020

BHQA Application

18 March 2020

Meeting Cancelled

16 April 2020

BHQA Granted Extension of Time

03 May 2020

To Legal for smoke detector

11 May 2020 Extension of Time Request

During the cycle inspection items for repair were noted in apartment #1. This apartment has an accumulation of items making it difficult for access to do repairs. The owner is requesting more time to complete these repairs. It was indicated at the reinspection that the tenant was supposed to have moved out but is still occupying the unit. All items except Unit 1 and the exterior were in compliance at the reinspection. BHQA granted an extension of time with deadline for 18 May 2020 for all items in Unit 1 and to immediately schedule smoke detector inspection. On 03 May 2020 a letter from legal was sent regarding the smoke detector. On 11 May 2020 HAND received an Extension of Time Request. The unit is now vacant and is being remodeled. Per the petitioner's application the unit has been gutted and they will need approximately 2 months to complete the repairs.

Staff recommendation:

Grant the extension of time

Conditions:

Complete all repairs and schedule for re-inspection no later than

the deadline stated below, or this case will be turned over to the



#### Application For Appeals (CEIIVE) Board of Housing Quality Appeals P.O. Box 100 Bloomington, IN 47402 812-349-3420 hand@bloomington.in.gov

| Property Address: 802 N. College Apartment 1  |                                |   |  |  |  |
|---|--------------------------------|---|--|--|--|
| Petitioner's Name: Linda Braunlin   |                                |   |  |  |  |
| Address: 6465 W. Tarkington Lane  |                                |   |  |  |  |
| City: Bloomington   | State: Indiana                 | <b>Zip Code:</b> 47403  |  |  |  |
| Phone Number: (812) 272-4550  | E-mail Address: Hido           | lencavernsfarm@yahoo.com  |  |  |  |
| Owner's Name: Linda Braunlin  |                                |   |  |  |  |
| Address: same as above  |                                |   |  |  |  |
| City;   | State:                         | Zip Code:   |  |  |  |
| Phone Number:   | E-mail Address:                |   |  |  |  |
| Occupants:  |                                | •   |  |  |  |
| <ol> <li>That the exception is consistent when the health, safety, and general welfare</li> </ol>   | vith the intent and purp<br>e. | order for the Board to consider the request: bose of the housing code and promotes public the exception is to apply will not be adversely |  |  |  |
| Identify the variance type that y   | ou are requesting fror         | n the following drop down menu:   |  |  |  |
| Variance Type: An extension of time   | e to complete repairs. (Peti   | ition Type: TV)   |  |  |  |
| Reminder: A \$20.00 filing fee must be submitted with the Appeal Application or the application will not be considered to be complete! A completed application has to be submitted prior to the meeting application deadline in order to be |                                | (Will be assigned by BHQA)  Petition Number: 20 -71/- 019   |  |  |  |
| placed on that months agendal   |                                | Petition Number: 20 TV - 019  (OLD BUSINAS)   |  |  |  |

Previously Harro April 15,2020 MA

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
  - 2. Explain why the extension is needed.
  - 3. Specify the time requested.
- B. A modification or exception to the Housing Property Maintenance Code. (Petition type: V)
  - 1. Specify the code reference number you are appealing.
  - 2. Detail why you are requesting the variance.
  - 3. Specify the modifications and or alterations you are suggesting.
- C. Relief from an administration decision. (Petition type: AA)
  - 1. Specify the decision being appealed and the relief you are seeking.
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

| This apartment has been inhabited by the same tenant for 12 years. He becking 2 months to move out. We rented a dumpster and finished cleaning upfilth. The apartment was in dire need of a total remodel. At this point in expect to take 2 months to remodel the unit. We have purchased new wir transoms and will be going above and beyond what was originally requirecordially asking for an extension of time to complete the restoration. | o his belongings a<br>time, the apartme<br>ndows, including | nd 12 years worth<br>ent is gutted and v<br>leaded glass antiq | or<br>ve<br>ue |
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| Signature (Required):  |   |  |                |
| Name (Print): Linda Braunlin   | Date:   | 5/8/20   | -              |
|  |   |  |                |

Important information regarding this application format:

- 1. This form is designed to be filled out electronically, printed, then returned/submitted manually (e.g. postal mail).
- 2. This document may be saved on your computer for future use, however, any data that you have entered will not be saved.

**Print Form** 

## City Of Bloomington Housing and Neighborhood Development

#### CYCLE INSPECTION REPORT

189

Owner(s)

Linda L. Braunlin 6465 W. Tarkington Lane Bloomington, IN 47403

Prop. Location: 802 N College AVE Number of Units/Structures: 7/1

Units/Bedrooms/Max # of Occupants: Bld 1: 1/Eff/5 6/1/5

Date Inspected: 09/16/2019 Primary Heat Source: Gas

Primary Heat Source: Gas
Property Zoning: CD

Number of Stories: 3

Inspector: Mike Arnold Foundation Type: Basement

Attic Access: Yes

Accessory Structure: none

Monroe County records show this structure was built in 1920. There were no minimum emergency egress requirements at the time of construction.

#### Interior:

Lower Level:

#### Unit 7 (South Unit):

This unit is not currently used as an apartment

Install a smoke detector in an approved location. If wall mounted, it shall be located between 4 and 12 inches from the ceiling. If ceiling mounted, it shall be located at least 4 inches from the wall. IC 22-11-18-3.5

#### Bathroom:

Repair the wall at the base of the shower adjacent to the sink. BMC 16.04.060(a)

#### West Room (Under Front Porch):

Secure the outlet to the ceiling. BMC 16.04.060(b)

#### Main Level:

#### Common Hallway:

No violations noted

#### Unit 1:

#### **Living Room (16-6 x 13-6):**

Repair the wall under the window, BMC 16.04.060(a) (North wall – West window).

Properly repair and surface coat the damaged portion of the ceiling. BMC 16.04.060(a)

Replace the missing smoke detector. IC22-11-18-3.5

#### Kitchen (6-6 x 6-0):

Properly repair and surface coat the damaged portion of the ceiling. BMC 16.04.060(a)

Repair/replace the outlet. BMC 16.04.060(b) (Ground prong is broken off in the outlet).

Properly repair and surface coat the damaged portion of the ceiling. BMC 16.04.060(a)

#### Bedroom $(10-7 \times 9-7)$ :

**Existing Egress:** 

Height:

22 inches

Width:

27 inches

Sill Height:

25 inches

Openable Area: 4.13 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

No violations noted

#### Unit 2:

#### Living Room (16-4 x 11-8), Study (9-8 x 7-4), Bathroom:

No violations noted

#### Kitchen:

Eliminate the source of the leak on the sink drain line. BMC 16.04.060(c) (Wet on top joint of trap)

Replace the missing drawer front. BMC 16.04.060(a)

#### Bedroom (10-9 x 7-9):

**Existing Egress:** 

Height:

38 inches

Width:

40 inches

Sill Height:

30 inches

Openable Area: 10.56 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

No violations noted

#### Unit 3:

#### Living Room (15-7 x 14-7), Kitchen (7-9 x 7-0), Bathroom:

No violations noted

#### Bedroom (14-6 x 10-0):

Existing Egress:

Height: 22 inches Width: 27 inches Sill Height: 25 inches

Openable Area: 4.13 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

Repair window to latch securely. BMC 16.04.060(b) (West wall)

#### Unit 4:

#### Bathroom:

Eliminate the leak/drip at the sink faucet. BMC 16.04.060(c)

#### **Living Room (15-3 x 11-0):**

Scrape and paint exterior surfaces where paint is peeling or wood is exposed. BMC 16.04.050(e) (Ceiling)

#### Kitchen:

No violations noted

#### Bedroom (9-3 x 8-3):

Existing Egress:

Height: 30 inches Width: 43 inches Sill Height: 24 inches Openable Area: 8.96 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

The smoke detector in this room appears to be more than ten years old and the manufacturer will not guarantee it to provide adequate protection. Install a new smoke detector in an approved location. If wall mounted, it shall be located between 6 and 12 inches from the ceiling. If ceiling mounted, it shall be located at least 4 inches from the wall. IC 22-11-18-3.5

#### Unit 5:

#### Main Room (11-4 x 10-5):

This room has a door to the exterior

No violations noted

#### Kitchen, Bathroom:

No violations noted

#### Unit 6:

#### Living Room/Kitchen/Bedroom [(13-5 x 11-1)+(14-4 x 8-8)]:

Existing Egress:

Height:

10 inches

Width:

33.5 inches

Sill Height:

21.5 inches

Openable Area: 2.33 sq. ft.

Note: These measurements are for reference only. There is no violation of the

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emergency egress requirements.

At the time this structure was built, there were no code requirements for emergency egress for a sleeping room. The Housing & Neighborhood Development Department strongly recommends that the sleeping room egress windows be modified or replaced with a larger window to aid in emergency escape.

No violations noted

#### Bathroom:

No violations noted

#### Exterior:

Properly repair the foundation, the front wall and the wing walls of the front porch. BMC 16.04.050(a)

Trim all tree branches away from the siding and roofline to maintain a 3' clearance. BMC 16.04.040(e)

Repair the hole in the roof overhang. BMC 16.04.050(a) (South side)

Repair the loose board/hole at the window on the north side of the structure. BMC 16.04.050(a)

Scrape and paint interior surfaces where paint is peeling or bare surfaces are exposed. BMC 16.04.060(f) (This item has a deadline of 13 September 2020) (Primarily windows and window trim where peeling).

#### Other Requirements:

#### Furnace Inspection Documentation:

Thoroughly clean and service the furnace, inspect and test shut off valves for proper operation. Documentation from a professional HVAC contractor for this service is acceptable and encouraged. Servicing shall include a test for carbon monoxide. Acceptable levels of carbon monoxide are as follows:

Desired level:

0 parts per million (ppm)

Acceptable level in a living space:

9 ppm

Maximum concentration for flue products:

50 ppm

BMC 16.01.060(f), BMC 16.04.060(c), BMC 16.04.060(b)

#### **Tenants and Owners Rights and Responsibilities Summary:**

A completed copy of the Tenants and Owners Rights and Responsibilities Summary must be provided to this office or reviewed with the inspector within 60 days of the date of the inspection or a \$25.00 fine will be levied. BMC 16.03.060(c) and BMC 16.10.030(b)

#### **Inventory Damage List:**

The owner or his agent shall contact the tenant and arrange a joint inspection of the premises to occur within ten days of the tenant's occupancy of the rental unit. The owner or his agent and the tenant shall at that time jointly complete an inventory and damage list, and this shall be signed by all parties to the tenancy agreement. Duplicate copies of the inventory and damage list shall be retained by all parties and shall be deemed a part of the tenancy agreement. A completed copy of the Inventory & Damage List must be provided to the office or reviewed with the inspector within 60 days of the date of the inspection or a \$25.00 fine will be levied. BMC 16.03.050(e) and BMC 16.10.030(b)

When issued, a copy of the new Rental Occupancy Permit shall be posted as required by BMC 16.03.030(d): All rental units shall be required to have a current occupancy permit displayed in an accessible location inside the unit. The permit shall contain the name of the owner or his agent and the expiration date of the permit. BMC 16.03.030(c)

This is the end of this report.



## **Board of Housing Quality Appeals Staff Report: Petition for Extension of Time**

Meeting Date:

June 16, 2020

Petition Type:

An extension of time to complete repairs

Petition Number:

20-TV-31 (old business)

Address:

520 W. Kirkwood Avenue

Petitioner:

Orion Property Management for Morrison Rentals LLC

Inspector:

Jo Stong

Staff Report:

January 17, 2020: Received complaint about east door

January 21, 2020: Conducted complaint inspection. Complaint valid.

January 28, 2020: Mailed complaint report.

February 14, 2020: Mailed complaint RV (remaining violations)

March 3, 2020: Received appeal

April 15, 2020: BHQA granted extension of time until April 30, 2020 to

complete repairs

April 24, 2020: Agent scheduled complaint reinspection for May 20, 2020.

New registration form received indicating new agent. May 14, 2020: New appeal received. Reinspection cancelled.

This property was granted an extension of time to repair a leak the east central entry door. The petitioner states that the leak is due to an active roof leak, and that the roof has been inspected by an insurance agent. The damage to the door and to the interior will be part of the insurance claim. The petitioner is requesting an additional 60 days to complete the repairs.

Staff recommendation:

Grant an extension of time

Conditions:

Complete all repairs and schedule for re-inspection no later than the deadline stated below, or this case will be turned over to the City of Bloomington Legal Department for further action including the

possibility of fines.

Compliance Deadline:

July 14, 2020

Attachments:

Complaint report, current appeal, previous appeal



In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
  - 2. Explain why the extension is needed.
  - 3. Specify the time requested.
- B. A modification or exception to the Housing Property Maintenance Code. (Petition type: V)
  - 1. Specify the code reference number you are appealing.
  - 2. Detail why you are requesting the variance.
  - 3. Specify the modifications and or alterations you are suggesting.
- C, Relief from an administration decision. (Petition type: AA)
  - 1. Specify the decision being appealed and the relief you are seeking.
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

| There is a door not opening properly in the interior of the home. It has too fleak. We are currently working with the insurance company and filed an insurance claim. There has been an inspection of the roof betarted to replace the roof. The interior damage from the leak and the will be addressed at that time. We are requesting additional 60 days insurance claim is with Duling Insurance, Mark Duling 812-332-180 765-602-4998. | I have discovered hall and wind damage and have<br>y an insurance adjustor and the process has been<br>ne damage to the door will be a part of this claim and<br>s time to complete this work. |
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| Signature (Required) MU MUUUAAA.  |  |
|   |  |
| Name (Print): Lisa Williamson   | Date: 5/14/20  |

Important information regarding this application format:

- 1. This form is designed to be filled out electronically, printed, then returned/submitted manually (e.g. postal mail).
- 2. This document may be saved on your computer for future use, however, any data that you have entered will not be saved.

**Print Form** 



# Application For Appeal To The Board of Housing Quality Appeals P.O. Box 100 Bloomington, IN 47402 812-349-3420 hand@bloomington.in.gov

| Property Addres  | ss: 520 w Kirkw | ood Av      | enue         |                     |                   |
|------------------|-----------------|-------------|--------------|---------------------|-------------------|
| Petitioner's Nam | ne: Flying Fish | n Desig     | gn and build | for Keith Pierrar   | d & Edna Morrison |
| Address: 1420    | s. Walnut St    |             |              |                     |                   |
| City: Blooming   | ton             | State:      | Indiana      | Zip Code:           | 47401             |
| Phone Number:    | (844) 532-8696  | E-mail      | Address: Chu | uck@flywiththefish. | com               |
| Owner's Name:    | Edna L Morris   | on          |              |                     | F                 |
| Address: N3341   | Country Road    | N           |              |                     | •                 |
| City: Keenan     |                 | State:      | Wisconsin    | Zip Code:           | 54537             |
| Phone Number:    | (812)876-5403   | E-mail      | Address: kdp | ierra@gmail.com     |                   |
| Occupants: Case  | ey Green & Rob  | ert Re<br>· | ynolds       |                     |                   |

#### The following conditions must be found in each case in order for the Board to consider the request:

- 1. That the exception is consistent with the intent and purpose of the housing code and promotes public health, safety, and general welfare.
- 2. That the value of the area about the property to which the exception is to apply will not be adversely affected.

Identify the variance type that you are requesting from the following drop down menu:

Variance Type: To complete repairs. (Petition Type: TV)

Reminder:

A \$20.00 filing fee must be submitted with the Appeal Application or the application will not be considered to be complete! A completed application has to be submitted prior to the meeting application deadline in order to be placed on that months agenda!

(Will be assigned by BHQA)

Petition Number: 20-TV-31

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
  - 2. Explain why the extension is needed.
  - 3. Specify the time requested.
- B. A modification or exception to the Housing Property Maintenance Code. (Petition type: V)
  - 1. Specify the code reference number you are appealing.
  - 2. Detail why you are requesting the variance.
  - 3. Specify the modifications and or alterations you are suggesting.
- C. Relief from an administration decision. (Petition type: AA)
  - 1. Specify the decision being appealed and the relief you are seeking.
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.
- 1. The Door frame leaks water when there is a heavy rain. Door needs to be reframed and drywall needs to be repaired.
- 2. This house is in the process of transitioning from one property management company to another. It is currently managed by Flying Fish Design and Build, and is transitioning to Orion Property Management. Because of the timing of the rein spection and the timing of the transition, both the owner of the house and the current property management company find themselves in unique positions. The owner wants the new property management group to hand the work, and the scope of the work would prolong the transition if the current property management company were to start the job.
- 3. The transition should take at least a week to complete, and the job itself should take another two weeks (depending on the availability of contractors to work on the house). So 3-4 weeks additional time to get the house in order for the complaint reinspection.

| Signature (Required): _ | Leitle Pierrand  |                                  |
|-------------------------|------------------|----------------------------------|
| Name (Print): Keith     | —5BDC93AACFBC41D | Date: 2/28/07 <sub>2/28/07</sub> |

Important information regarding this application format:

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**Print Form** 



## City Of Bloomington Housing and Neighborhood Development

#### JAN 2 8 2020

Edna L. Morrison N3341 Country Road N Keenen, WI 54537

RE: NOTICE OF COMPLAINT INSPECTION

Dear Edna L. Morrison

On 01/21/2020 a complaint inspection was performed at 520 W Kirkwood AVE. During the inspection violations of the Residential Rental Unit and Lodging Establishment Inspection Program were found.

Please correct the violations cited on the enclosed inspection report within fourteen days (14) and call this office no later than **FEB 1 2020**, to schedule the required re-inspection. Our mailing address and telephone number are listed below.

This directive is issued in accordance with Sections BMC 16.03.040 (c) and 16.10.040 (a) of the Residential Rental Unit and Lodging Establishment Inspection Program of Bloomington. You have the right to appeal to the Board of Housing Quality Appeals. If you need more than fourteen (14) days to correct the violations, or if you want to appeal any violation, an appeal form can be found at www.bloomington.in.gov/hand. If you do not have access to the internet, you may contact HAND at 812-349-3420 and a form will be provided.

Please remember, it is your responsibility to contact the Housing and Neighborhood Development Department to schedule the required re-inspection.

If you have any questions regarding the permit process, please call weekdays between 8:00 a.m. and 5:00 p.m., at (812) 349-3420.

Sincerely,

Housing & Neighborhood Development

Encl: Inspection Report

Xc: Flying Fish Real Estate: 1420 S Walnut St, Bloomington, IN 47401





## City Of Bloomington Housing and Neighborhood Development

#### COMPLAINT INSPECTION REPORT

1167

Owner

Edna L. Morrison N3341 Country Road N

Keenen, WI 54537

Agent

Flying Fish Real Estate

1420 S. Walnut St

Bloomington, IN 47401

Tenant

Casey Green

520 W. Kirkwood Ave

Bloomington, IN 47404

Prop. Location: 520 W Kirkwood AVE

Number of Units/Structures: 1/1

Units/Bedrooms/Max # of Occupants: Bld 1: 1/3/5

Date Inspected: 01/21/2020

Primary Heat Source: Gas

Property Zoning: CG

Number of Stories: 1

Inspector: Jo Stong

Foundation Type: Basement

Attic Access: No

Accessory Structure: Detached Garage, Shed

The following items are the result of a complaint inspection conducted on **January 21, 2020.** It is your responsibility to repair these items and to schedule a re-inspection within **fourteen (14)** days of the mailing of this report. Failure to comply with this inspection report will result in this matter being referred to the City of Bloomington Legal Department. Failure to comply with this complaint inspection report may result in fines. If you have questions regarding this report, please contact this office at 349-3420.

#### INTERIOR:

The east central door frame leaks water into the house during rain. Repair the door, frame and or structure to eliminate water leaking into the interior of the structure. BMC 16.04.060(a)

This is the end of this report.



## **Board of Housing Quality Appeals Staff Report: Petition for Extension of Time**

Meeting Date:

June 17, 2020

Petition Type:

An extension of time to complete repairs

Petition Number:

20-TV-38

Address:

3643 E. Park Ln.

Petitioner:

Claudia Avellaneda

Inspector:

Norman Mosier

Staff Report:

February 4, 2020 - Conducted cycle inspection

April 21, 2020 - Sent Remaining violations report

April 28, 2020 - Received BHQA appeal

The Petitioner is requesting an extension of time to complete the repairs due to inability to secure contractors to do the work. Property is vacant.

Staff recommendation: Grant the request.

Conditions:

Complete all repairs and schedule for re-inspection no later than the deadline stated below, or this case will be turned over to the City of Bloomington Legal Department for further action including the

possibility of fines.

Compliance Deadline: June 30, 2020 – For life safety violations

August 17, 2020 - For all other repairs

Attachments: Cycle Report, BHQA Appeal, Petitioner's Letter





## Application For Appeal CF To The To The Board of Housing Quality Appeals 2 4 2020 P.O. Box 100 Bloomington, IN 47402 812-349-3420 hand@bloomington.in.gov

| Property Address: 3643 E Park La  | ne                          |                        |
|-----------------------------------|-----------------------------|------------------------|
| Petitioner's Name: Claudia N. Ave | ellaneda                    |                        |
| Address: 3725 E Brownridge Rd,    |                             |                        |
| City: Bloomington                 | State: Maryland             | <b>Zip Code:</b> 47401 |
| Phone Number: (979) 220-1931      | E-mail Address: clanabe@gma | ail.com                |
| Owner's Name: Claudia N. Avellar  | neda                        |                        |
| Address: 3725 E Brownridge Rd     |                             |                        |
| City: Bloomington                 | State: Indiana              | <b>Zip Code:</b> 47401 |
| Phone Number: 979-220-1931        | E-mail Address: clanabe@gma | il.com                 |
| Occupants: none                   |                             |                        |

#### The following conditions must be found in each case in order for the Board to consider the request:

- 1. That the exception is consistent with the intent and purpose of the housing code and promotes public health, safety, and general welfare.
- 2. That the value of the area about the property to which the exception is to apply will not be adversely affected.

#### Identify the variance type that you are requesting from the following drop down menu:

Variance Type: An extension of time to complete repairs, (Petition Type: TV)

#### Reminder:

A \$20,00 filing fee must be submitted with the Appeal Application or the application will not be considered to be complete! A completed application has to be submitted prior to the meeting application deadline in order to be placed on that months agenda!

(Will be assigned by BHQA)

Petition Number: 20-TU-38

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
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  - 3, Specify the time requested.
- B. A modification or exception to the Housing Property Maintenance Code. (Petition type: V)
  - 1. Specify the code reference number you are appealing.
  - 2. Detail why you are requesting the variance.
  - 3. Specify the modifications and or alterations you are suggesting.
- C. Relief from an administration decision. (Petition type: AA)
  - 1. Specify the decision being appealed and the relief you are seeking.
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

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| rented neither due to the health chass.   |                                  |                      |
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| Signature (Required): <u>Claudia Avellaneda</u>   |                                  |                      |
| Name (Print): Claudia N. Avellaneda   | Date:                            | 4/24/20              |
| Important information regarding this application form 1. This form is designed to be filled out electronically, (e.g. postal mail). | printed, then returned/sub       |                      |
| 2. This document may be saved on your computer for entered will not be saved.   | iuture use, nowever, any u       | ata mai you nave     |

**Print Form** 



## City Of Bloomington Housing and Neighborhood Development

#### CYCLE INSPECTION REPORT

1317

Owner(s)

Avellaneda, Claudia 3725 E. Brownridge Road Bloomington, IN 47401

Prop. Location: 3643 E Park LN Number of Units/Structures: 1/1

Units/Bedrooms/Max # of Occupants: Bld 1: 1/3/3

Date Inspected: 02/04/2020 Primary Heat Source: Gas Property Zoning: RS

Number of Stories: 1

Inspector: Norman Mosier Foundation Type: Crawl Space

Attic Access: Yes

Accessory Structure: None

The Monroe County Assessor's records indicate that this structure was built in 1962. There were no emergency egress requirements at the time of construction.

#### **GENERAL VIOLATION:**

Properly ground the electrical receptacles for structure. If the receptacles are on an ungrounded system, it is acceptable to install 2-pole, ungrounded receptacles, or GFCI receptacles. If GFCI receptacles are installed, label receptacles with the wording "no equipment ground." BMC 16.04.020(a)(5); 2009 IEC Article 406.3(B) Grounding & 2009 IEC Article 406.3 (D)Replacements

#### **INTERIOR:**

#### Living Room 23-6 x 13:

See general violation.

Family Room 25-10 x 14-6: Fireplace located here, see other requirements.

See general violation.

Secure the loose and protruding receptacle on the south wall. BMC 16.04.060 (b)

Replace the missing receptacle cover plate on the east wall. BMC 16.04.060(b)

-<u>Attic:</u>

Secure the loose receptacle to the wall, north of attic opening. BMC 16.04.060 (b)

½ Bath, Laundry Room:

See general violation.

#### Kitchen 9-6 x 9-2:

See general violation.

Secure the loose sprayer at the base. BMC 16.04.060 (c)

Install a cable clamp where the power supply enters the garbage disposal. BMC 16.04.060(c)

Hallway:

See general violation.

Hall Bath:

See general violation.

SW Bedroom 11-10 x 11-7:

See general violation.

 $\sqrt{\phantom{a}}$ 

Every window shall be capable of being easily opened and held in position by its own hardware, south window. BMC 16.04.060(b)

Existing Egress Window Measurements: Dbl hung pop out: Const. Yr. - 1962

Height: 33 inches Width: 43.25 inches Sill Height: 45.5 inches Openable Area: 9.91 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

NW Bedroom 11-5 x 11-2:

See general violation.

Existing Egress Window Measurements: Dbl hung pop out: Const. Yr. - 1962

Height: 32 inches Width: 26 inches Sill Height: 46 inches Openable Area: 5.78 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

NE Bedroom 11-7 x 10: Exit door for egress requirements.

See general violation.

**EXTERIOR:** 

Install the missing dryer vent cover, north side of structure. BMC 16.04.050(a)

Crawlspace: Gas furnace located here, see other requirements.

Re-install the entry door. BMC 16.04.050(a)

Replace the broken window on the entry door. BMC 16.04.050(a)

#### OTHER REQUIREMENTS:

#### Furnace Inspection Documentation

Thoroughly clean and service the furnace, inspect and test shut off valves for proper operation. Documentation from a professional HVAC contractor for this service is acceptable and encouraged. Servicing shall include a test for carbon monoxide. Acceptable levels of carbon monoxide are as follows:

Desired level:

0 parts per million (ppm)

Acceptable level in a living space:

9 ppm 50 ppm

Maximum concentration for flue products:

BMC 16.01.060(f), BMC 16.04.060(c), BMC 16.04.060(b)

Show documentation that the fireplace has been inspected within the last twelve months, and that it is safe for use, or permanently and visibly seal the fireplace to prevent its use. Service and inspection shall include the firebox, damper, chimney and/or flue. Cleaning by a professional service is highly recommended. BMC 16.01.060(f)

When issued, a copy of the new Rental Occupancy Permit shall be posted as required by BMC 16.03.030(d): All rental units shall be required to have a current occupancy permit displayed in an accessible location inside the unit. The permit shall contain the name of the owner and the agent, the occupant load of the unit, the number of bedrooms, the expiration date of the permit, and any variances that have been granted for the property. BMC 16.03.030(c)

This is the end of this report.



#### City Of Bloomington

#### Housing and Neighborhood Development

REMAINING VIOLATION INSPECTION REPORT

1317

Owner(s)

Avellaneda, Claudia 3725 E. Brownridge Road Bloomington, IN 47401

Prop. Location: 3643 E Park LN Number of Units/Structures: 1/1

Units/Bedrooms/Max # of Occupants: Bld 1: 1/3/3

Date Inspected: 02/04/2020 Primary Heat Source: Gas Property Zoning: RS

Number of Stories: 1

Inspector: Norman Mosier Foundation Type: Crawl Space

Attic Access: Yes

Accessory Structure: None

The Monroe County Assessor's records indicate that this structure was built in 1962. There were no emergency egress requirements at the time of construction.

#### REINSPECTION REQUIRED

This report is your final notice from the Housing and Neighborhood Development Office that this rental property continues to be in violation of the Residential Rental Unit and Lodging Establishment Inspection Program of Bloomington.

If you have made all of the repairs on this report, contact our office immediately to schedule the required re-inspection.

Failure to make repairs or to schedule the required re-inspection will result in this matter being referred to the City Legal Department. Legal action may be initiated against you under BMC 16.10.040

It is your responsibility to contact the Housing and Neighborhood Development Office to schedule the required re-inspection. Our mailing address and telephone number are listed below.

The Monroe County Assessor's records indicate that this structure was built in 1962. There were no emergency egress requirements at the time of construction.

#### **GENERAL VIOLATION:**

Properly ground the electrical receptacles for structure. If the receptacles are on an ungrounded system, it is acceptable to install 2-pole, ungrounded receptacles, or GFCI receptacles. If GFCI receptacles are installed, label receptacles with the wording "no equipment ground." BMC 16.04.020(a)(5); 2009 IEC Article 406.3(B) Grounding & 2009 IEC Article 406.3 (D)Replacements

#### **INTERIOR:**

#### Living Room 23-6 x 13:

See general violation.

Family Room 25-10 x 14-6: Fireplace located here, see other requirements.

See general violation.

✓ Secure the loose and protruding receptacle on the south wall. BMC 16.04.060 (b)

Replace the missing receptacle cover plate on the east wall. BMC 16.04.060(b)

/ Attic:

Secure the loose receptacle to the wall, north of attic opening. BMC 16.04.060 (b)

#### ½ Bath, Laundry Room:

See general violation.

#### Kitchen 9-6 x 9-2:

See general violation.

Secure the loose sprayer at the base. BMC 16.04.060 (c)

Install a cable clamp where the power supply enters the garbage disposal. BMC 16.04.060(c)

#### Hallway:

See general violation.

#### Hall Bath:

See general violation.

#### SW Bedroom 11-10 x 11-7:

See general violation.

Every window shall be capable of being easily opened and held in position by its own hardware, south window. BMC 16.04.060(b)

Existing Egress Window Measurements: Dbl hung pop out: Const. Yr. - 1962

Height: 33 inches Width: 43.25 inches Sill Height: 45.5 inches Openable Area: 9.91 sq. ft.

Note: These measurements are for reference only. There is no violation of the emergency egress requirements.

#### NW Bedroom 11-5 x 11-2:

See general violation.

Existing Egress Window Measurements: Dbl hung pop out: Const. Yr. - 1962

Height: 32 inches Width: 26 inches Sill Height: 46 inches Openable Area: 5.78 sq. ft. Note: These measurements are for reference only. There is no violation of the emergency egress requirements.

NE Bedroom 11-7 x 10: Exit door for egress requirements. See general violation.

#### **EXTERIOR:**

Install the missing dryer vent cover, north side of structure. BMC 16.04.050(a)

<u>Crawlspace:</u> Gas furnace located here, see other requirements. Re-install the entry door. BMC 16.04.050(a)

Replace the broken window on the entry door. BMC 16.04.050(a)

#### **OTHER REQUIREMENTS:**

#### **Furnace Inspection Documentation**

Thoroughly clean and service the furnace, inspect and test shut off valves for proper operation. Documentation from a professional HVAC contractor for this service is acceptable and encouraged. Servicing shall include a test for carbon monoxide. Acceptable levels of carbon monoxide are as follows:

Desired level:

0 parts per million (ppm)

Acceptable level in a living space:

9 ppm

Maximum concentration for flue products:

50 ppm

BMC 16.01.060(f), BMC 16.04.060(c), BMC 16.04.060(b)

Show documentation that the fireplace has been inspected within the last twelve months, and that it is safe for use, or permanently and visibly seal the fireplace to prevent its use. Service and inspection shall include the firebox, damper, chimney and/or flue. Cleaning by a professional service is highly recommended. BMC 16.01.060(f)

When issued, a copy of the new Rental Occupancy Permit shall be posted as required by BMC 16.03.030(d): All rental units shall be required to have a current occupancy permit displayed in an accessible location inside the unit. The permit shall contain the name of the owner and the agent, the occupant load of the unit, the number of bedrooms, the expiration date of the permit, and any variances that have been granted for the property. BMC 16.03.030(c)

This is the end of this report.



#### **Board of Housing Quality Appeals** Staff Report: Petition for Relief from an Administrative Decision

Meeting Date:

June 17, 2020

Petition Type:

Relief from an administrative decision

Variance Request:

Relief from the requirement to register and inspect.

Petition Number:

20-AA-39

Address:

231 N Adams

Petitioner:

Crystal Dalton

Inspector:

John Hewett

Staff Report: March 14, 2019

Cycle Inspection with Owner

May 20, 2019

R4eceived appeal for an Extension of time. BHQA granted extension until July 26, 2019

June 17, 2019 May 1, 2020

Received Appeal for this property to be exempt from the

requirements of Title 16.

This house is occupied by the owner's disabled father and her mother who is the father's care giver. The owner is asking for relief from the requirements of Title 16.

Staff recommendation: Grant the relief from administrative decision.

Conditions: This unit will be granted relief from the requirements of Title 16 for as long as the current owner and tenant are un-changed from the current status. An affidavit of occupancy will be required yearly to verify no changes have been made. If this status changes, the requirements of Title 16 may be re-instated.

Compliance Deadline: The affidavit will be due in January of each year.

Attachments: Appeal form





#### **Application For Appeal**

To The
Board of Housing Quality Appeals
P.O. Box 100 | APR 2 4 2020
Bloomington, IN 47402
812-349-3420 BY:
hand@bloomington.in.gov

| Property Address: 231 W Aplam   | SSI Bloomington IN                         |
|---|--|
| Petitioner's Name: Crystal Datte  | $\frac{90}{100}$                           |
| Address: 231 N Adams St   |  |
| ciny. Hasmington State: In  | © Zip Code: 47404                          |
| Phone Number: 313-335. E-mail Address: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\  | 1-angel 219 a live.com                     |
| Owner's Name: Crystal Dator   | )  |
| Address: 231 W Adams St   |  |
| city: Bloomingten state: In   | © Zip Code: 47404                          |
| Phone Number: 813- E-mail Address: 325-3410   |  |
| Occupants: Tim + Dobbie Dall  | HOY .                                      |
| The following conditions must be found in each case in or 1. That the exception is consistent with the intent and purporhealth, safety, and general welfare.  2. That the value of the area about the property to which the affected. | se of the housing code and promotes public |
| Identify the variance type that you are requesting from   | the following drop down menu:              |
| Variance Type: BHOA.  |  |
| Reminder:<br>A \$20.00 filing fee must be submitted with the Appeal<br>Application or the application will not be considered to be  | (Will be assigned by BHQA)                 |
| complete! A completed application has to be submitted prior to the meeting application deadline in order to be placed on that months agenda!  | Petition Number: 20 - V - 39               |
| I do not want to reg  | isk-my                                     |

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
  - 2. Explain why the extension is needed.
  - 3. Specify the time requested.

modification or exception to the Housing Property Maintenance Code. (Petition type: V)

- 1. Specify the code reference number you are appealing.
- 2 Detail why you are requesting the variance.
- 3. Specify the modifications and or alterations you are suggesting.
- C. Relief from an administration decision. (Petition type: AA)
  - 1. Specify the decision being appealed and the relief you are seeking.
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance,
  - 2. Specify the reason the variance is no longer needed.

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| property of 231 n Adams . St. In Illery my |
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| disabled and my mom is his care            |
| giver. Ther is no rest paid                |
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| Name (Print):     | Crystal               | Dulton              | Date:                                 | <del>2/28/07</del>                               |
| Important inform  | nation regarding this | application format: | · · · · · · · · · · · · · · · · · · · | 4122120  |

1. This form is designed to be filled out electronically, printed, then returned/submitted manually (e.g. postal mail).

2. This document may be saved on your computer for future use, however, any data that you have entered will not be saved.



## **Board of Housing Quality Appeals Staff Report: Petition for Extension of Time**

Meeting Date:

June 17th, 2020

Petition Type:

An extension of time to complete repairs.

Petition Number:

20-TV-40

Address:

605 E. University

Petitioner:

Choice Realty & Management

Inspector:

Kenny Liford

Staff Report:

March 13th, 2020 Completed Cycle Inspection Report

May 11th, 2020 BHQA application received

Agent has requested an extension of time to complete repairs to the ceiling in the living room. They would like to complete the work once the property is vacant.

Staff recommendation: Grant the request.

Conditions: Have all repairs listed in the cycle report other than the living room ceiling completed and a re-inspection scheduled in the normal time frame. Have the ceiling repairs completed and a re-inspection scheduled by the deadline listed below.

Compliance Deadline: August 10th, 2020.

Attachments: Cycle report, BHQA Appeal





placed on that months agendal

Application For Appeal
To The
Board of Housing Quality Appeals
P.O. Box 100
Bloomington, IN 47402
812-349-3420
hand@bloomington.in.gov

Page 1 of 2

| Property Address: 605   | E University  |  |  |  |
|---|---|--|--|--|
| Petitioner's Name: Ch   | oice Realty & Management  |  |  |  |
| Address: 1715 S Walnut  | St  |  |  |  |
| City: Bloomington   | State: Indiana  | <b>Zip Code:</b> 47401   |  |  |
| Phone Number: 812   | 3317353 E-mail Address: dena@   | callchoicerealty.com   |  |  |
| Owner's Name: Raymo   | ond Kahn  |  |  |  |
| Address: 3-16-6 Nishiha   | ra Shibuya-ku   |  |  |  |
| City: Tokyo   | State: Japan  | <b>Zip Code:</b> 15100   |  |  |
| Phone Number: E-mail Address: raymond.a.kahn@pwc.com  |   |  |  |  |
| Occupants: 5  |   |  |  |  |
| <ol> <li>That the exception is<br/>health, safety, and ge</li> <li>That the value of the</li> </ol> | consistent with the intent and purpor<br>neral welfare.   | der for the Board to consider the request:<br>se of the housing code and promotes public<br>e exception is to apply will not be adversely  |  |  |
| affected.  Identify the variance  | type that you are requesting from   | the following drop down menu:  |  |  |
|   | ension of time to complete repairs. (Petiti   | The second secon |  |  |
| Application or the appl complete! A complete  | be submitted with the Appeal ication will not be considered to be application has to be submitted plication deadline in order to be | (Will be assigned by BHQA)  Petition Number: $20-TV-40$  |  |  |

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
  - 2. Explain why the extension is needed.
  - 3. Specify the time requested.
- B. A modification or exception to the Housing Property Maintenance Code. (Petition type: V)
  - 1. Specify the code reference number you are appealing.
  - 2. Detail why you are requesting the variance.
  - 3. Specify the modifications and or alterations you are suggesting.
- C. Relief from an administration decision. (Petition type: AA)
  - 1. Specify the decision being appealed and the relief you are seeking.
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

| For the line item for the living room ceiling to be repaired we would like & pre tenants move out July 23rd and do this job at that time. So not to disturb the that large area and unit would then be vacant to work in for this portion of the | fer to do that i<br>current tenant<br>e requirement: | epair after<br>t with mess<br>s. | current<br>& debris in |
|--|--|----------------------------------|------------------------|
| So we are requisiting an extension until 8/10 for this property.   |  |                                  |                        |
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|  |  |                                  |                        |
| Signature (Required): Chrie Realty & Mang  | ent-1  | (km                              | Cilm                   |
| Signature (Required):  |  | -1-                              | 1                      |
| Name (Print): Dena Dobson  | Date:  | <u> </u>                         | 12020                  |
| the regarding this application format:   |  |                                  |                        |

Important information regarding this application format:

- 1. This form is designed to be filled out electronically, printed, then returned/submitted manually (e.g. postal mail).
- 2. This document may be saved on your computer for future use, however, any data that you have entered will not be saved.

**Print Form** 



## City Of Bloomington Housing and Neighborhood Development

#### RENTAL INSPECTION INFORMATION

MAR 2 3 2020

Kahn, Raymond 3-16-6 Nishihara Shibuya-Ku, Tokyo, JP 151-0066

RE: 605 E University ST

Please find the enclosed Rental Inspection Report which contains pertinent information about the Cycle Inspection that was recently conducted at the above referenced property. The inspector has listed all noted violations and recommendations on the enclosed Rental Inspection Report. You have sixty (60) days from the date of this letter to correct the violations listed on the report.

Once violations have been corrected, it is your responsibility to call the Housing and Neighborhood Development office within this 60 day window but no later than MAY 2 2 2020 to schedule a re-inspection. You have the right to appeal any violation of Bloomington Municipal Code Title 16 noted on the rental inspection report to the Board of Housing Quality Appeals.

This report is issued in accordance with BMC 16.10.020 and 16.10.040 of the Residential Rental Unit and Lodging Establishment Inspection Program. Residential Rental Occupancy Permits will not be issued until all interior and exterior violations have been corrected, and all fees have been paid. Bloomington Municipal Code requires that all violations of all Titles of the BMC must be in compliance before a permit will be issued. Please be advised that non-compliance by the deadlines listed in this letter may limit the permit period to a maximum of three (3) years.

If the owner's or agent's contact information has changed since your last inspection, please submit a new registration form to the HAND Department. The registration must be signed by the owner of the property, not the agent. All rental forms and documents can be found at www.bloomington.in.gov/hand. If you do not have access to the internet, you may contact HAND at 812-349-3420 and forms will be provided.

If you have any questions regarding the permit process, please call weekdays between 8:00 a.m. and 5:00 p.m., at (812) 349-3420.

Sincerely,

Housing & Neighborhood Development
Encl:Inspection Report,
Xc:Choice Realty & Management: 1715 S. Walnut Street, Bloomington, IN 47401







## City Of Bloomington Housing and Neighborhood Development

#### CYCLE INSPECTION REPORT

1872

Owner(s)

Kahn, Raymond 3-16-6 Nishihara Shibuya-Ku, Tokyo, JP 151-0066

Agent

Choice Realty & Management 1715 S. Walnut Street Bloomington, IN 47401

Prop. Location: 605 E University ST Number of Units/Structures: 1/1

Units/Bedrooms/Max # of Occupants: Bld 1: 1/5/5

Date Inspected: 03/11/2020 Primary Heat Source: Gas

Property Zoning: RC

Number of Stories: 2

Inspector: Kenny Liford

Foundation Type: Basement

Attic Access: No

Accessory Structure: None

Monroe County records show this structure was built in 1925. There were no minimum emergency egress requirements at the time of construction.

#### INTERIOR

**Basement** 

Provide operating power to the smoke detector. IC 22-11-18-3.5

Main Level

Living Room (23-0 x 12-0)

Repair the surface of the ceiling to be free of holes, cracks, peeling paint and/or sagging materials. BMC 16.04.060(a)

Provide operating power to the smoke detector. IC 22-11-18-3.5

Dining Room (13-0 x 12-0)

Replace the missing smoke detector. IC22-11-18-3.5

Secure all loose electrical receptacles in this room. BMC 16.04.060(b)

City Hall

401 N Morton St

Bloomington, IN 47404

#### Laundry Room

Securely attach the dryer vent line to the dryer. BMC 16.04.060(c)

#### Bathroom, Kitchen $(12-0 \times 10-0)$

No violations noted.

#### Bedroom (13-0 x 10-0)

No violations noted.

#### **Existing Egress:**

Height: 25.5 inches Width: 27 inches Sill Height: 17 inches

Openable Area: 4.78 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

#### Upper Level

#### Hallway

The smoke detector in this room appears to be more than ten years old and the manufacturer will not guarantee it to provide adequate protection. Install a new smoke detector in an approved location. If wall mounted, it shall be located between 6 and 12 inches from the ceiling. If ceiling mounted, it shall be located at least 4 inches from the wall. IC 22-11-18-3.5

### North Bedroom (12-0 x 10-0), SE Bedroom (13- x 9-0), SW Bedroom, Bathroom No violations noted.

#### **Existing Egress:**

Height: 26 inches Width: 31 inches Sill Height: 26 inches Openable Area: 5.60 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

#### NE Bedroom (12-0 x 9-0)

Replace the missing smoke detector. IC22-11-18-3.5

Secure the loose electrical receptacle located in the floor. BMC 16.04.060(b)

Properly ground the electrical receptacle. (In the floor) If the receptacle is on an ungrounded system, it is acceptable to install a 2-pole, ungrounded receptacle, or a GFCI receptacle. If a GFCI receptacle is installed, mark receptacle with the wording "no equipment ground." BMC 16.04.020(a)(5); 2009 IEC Article 406.3(B)Grounding & 2009 IEC Article 406.3 (D)Replacements

#### **Existing Egress:**

Height: 24 inches
Width: 31 inches
Sill Height: 25 inches

Openable Area: 5.16 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

#### **EXTERIOR**

Secure the handrail (Back Deck) so it is capable of withstanding normally imposed loads. BMC 16.04.050(b) and BMC 16.04.060(b)

Replace the missing cover plate for the GFCI on back deck. BMC 16.04.050(a)

When issued, a copy of the new Rental Occupancy Permit shall be posted as required by BMC 16.03.030(d): All rental units shall be required to have a current occupancy permit displayed in an accessible location inside the unit. The permit shall contain the name of the owner and the agent, the occupant load of the unit, the number of bedrooms, the expiration date of the permit, and any variances that have been granted for the property. BMC 16.03.030(c)

This is the end of this report.



#### **Board of Housing Quality Appeals** Staff Report: Petition for Relief from an Administrative Decision

Meeting Date:

June 17, 2020

Petition Type:

Relief from an administrative decision

Variance Request:

Relief from the requirement to register and inspect.

Petition Number:

20-AA-41

Address:

1802 W. Arlington Road

Petitioner:

Andrea Bock, for Lois Faye Revocable Trust

Inspector:

John Hewett

Staff Report: April 3, 2020

Drive by inspection, appears to be occupied.

May 5, 2020

Notice to register and schedule was sent to owner.

May 12, 2020

Received Appeal for this property to be exempt from the

requirements of Title 16.

This house is occupied by the owner's son. He occasionally has friends stay over. No one else lives there. The owner is asking for relief from the requirements of Title 16.

Staff recommendation: Grant the relief from administrative decision.

Conditions: This unit will be granted relief from the requirements of Title 16 for as long as the current owner and tenant are un-changed from the current status. An affidavit of occupancy will be required yearly to verify no changes have been made. If this status changes, the requirements of Title 16 may be re-instated.

Compliance Deadline: The affidavit will be due in January of each year.

Attachments: Appeal form





prior to the meeting application deadline in order to be

placed on that months agenda!

Application For Appeal
To The
Board of Housing Quality Appeals
P.O. Box 100
Bloomington, IN 47402
812-349-3420
hand@bloomington.in.gov

Petition Number: 20-AA-41

|  | "  |
|--|--|
| Property Address: 1802 Arlington Road  |  |
| Petitioner's Name: Andrea Bode   |  |
| Address: 2465 Raffleshake Rab  |  |
| City: Spucer State: TN   | Zip Code: 17460  |
| Phone Number: 8/2829400 E-mail Address: aubock Olmail. Com   |  |
| Owner's Name: LOIS Faye Wollble Trust  |  |
| Address: 2465 Rattle shake Dd  |  |
| City: Spacer State: IN   | Zip Code: 47460  |
| Phone Number: 8/28294011 E-mail Address: Auboch Cemail.com   |  |
| Occupants: Jeff BOCK   |  |
| The following conditions must be found in each case in order for the Board to consider the request:  |  |
| 1. That the exception is consistent with the intent and purpose of the housing code and promotes public health, safety, and general welfare. |  |
| 2. That the value of the area about the property to which the exception is to apply will not be adversely affected.                          |  |
| Identify the variance type that you are requesting from the following drop down menu:  |  |
| Variance Type: Puliet from an administration classision.   |  |
| Reminder:  | Walter Street St |
| A \$20.00 filing fee must be submitted with the Appeal   | (Will be assigned by BHQA)   |
| Application or the application will not be considered to be complete! A completed application has to be submitted                            | , , ,  |

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

- A. An extension of time to complete repairs. (Petition type: TV)
  - 1. Specify the items that need the extension of time to complete.
  - 2. Explain why the extension is needed.
  - 3. Specify the time requested.
- B. A modification or exception to the Housing Property Maintenance Code. (Petition type: V)
  - 1. Specify the code reference number you are appealing.
  - 2. Detail why you are requesting the variance.
  - Specify the modifications and or alterations you are suggesting.

C. Riglief from an administration decision. (Petition type: AA)

- 1. Specify the decision being appealed and the relief you are seeking,
- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

The property in question is not a rectal. It is depend by my thother's trust, since she has passed she wanted it to stay in the family and for a member of our family to live there, currently that is my sun, Jeft Book, He may take people (lor2) stay with him from time to time but to the will be paying by hust to him or the trust. No income is created by this property.

| Signature (Required); Judicu Bell |                |
|-----------------------------------|----------------|
| Name (Print): Andrea Boak         | Date: 5-7-2020 |
|                                   | * I            |

Important information regarding this application format:

- 1. This form is designed to be filled out electronically, printed, then returned/submitted manually (e.g. postal mail).
- 2. This document may be saved on your computer for future use, however, any data that you have entered will not be saved.

**Print Form** 



# Board of Housing Quality Appeals Staff Report: Petition for Extension of Time

Meeting Date:

June 17, 2020

Petition Type:

An extension of time to complete repairs.

Petition Number:

20-TV-42

Address:

345 S Curry Pike

Petitioner:

Mackie Properties

Inspector:

Matt Swinney/ John Hewett

Staff Report:

September 26, 2019

Cycle inspection.

December 10, 2019

Received Appeal for extension of

time.

January 15, 2020

BHQA granted extension.

May 12, 2020

Reinspection, All complied except

Unit 21.

The tenant of Unit 21 is on dialysis and is concerned with Covid contamination. The agent has asked for an extension until the danger from Covid -19 has passed.

Staff recommendation:

Grant the extension.

Conditions:

Complete all repairs and schedule for re-inspection no later than the deadline stated below, or this case will be turned over to the City of Bloomington Legal Department for further action,

including, but not limited to, the possibility of fines.

Compliance Deadline:

December 31, 2020

Attachments:

Appeal letter, cycle report.





# Application For Appeal To The Company of Housing Quality Appeals P.O. Box 100 MAY 2020 Bloomington, IN 47402 812-349-3420 hand@bloomington.in.gov

| Property Address: 345 S Curry Pike, Unit   | 21, Bloomington, IN 47403                 |
|--|---|
| Petitioner's Name: Mackie Properties   | <i>y</i>                                  |
| Address: PO Box 236 (Strike: Blooms  | walnut St.                                |
| city: Ellettsville State: IN   |   |
| Phone Number: 812-287-8036 E-mail Address:   | seph@mackierentalproportice.com           |
| Owner's Name: Citadel Investment   |   |
| Address: 4810 E Heritage Woods Dr  |   |
| City: Bloomington State: 1N  | Zip Code: 47401                           |
| Phone Number: (812)340-9132 E-mail Address: jeff   |   |
| Occupants:   |   |
| The following conditions must be found in each case in ord.  1. That the exception is consistent with the intent and purpose health, safety, and general welfare.  2. That the value of the area about the property to which the affected. | e of the housing code and promotes public |
| ldentify the variance type that you are requesting from t  | he following drop down menu:              |
| Variance Type:   |   |
| Reminder: A \$20.00 filing fee must be submitted with the Appeal Application or the application will not be considered to be complete! A completed application has to be submitted   | (Will be assigned by BHQA)                |
| prior to the meeting application deadline in order to be placed on that months agendal   | Petition Number: 20-T U- 42               |

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

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- C. Relief from an administration decision. (Petition type: AA)
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- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

| 1. Initial inspection for 1 unit                                 |
|--|
| 2. Tenant is on dialysis and in minur-compromised. Recently home |
| from the hospital. Concurred over spreading COVID-19. Ashs       |
| that we delay inspection of this unit until they are able        |
| to safely be around others.                                      |
| 3. Six months. We don't know how long the COVID-19 threat        |
| will continue to affect this person, even after the gout.        |
| officially ends restrictions. They've bun in nume -              |
| compromises and requested we delayed entering their              |
| unit prior to covid, and we are unable to                        |
| determine when they will recover evough to allow                 |
| entry Hapathally, Life a months, lut we'd rather be              |
| soft the said  |

Signature (Required):

ame (Print): Rachel Joseph

Date: 5/11/2020

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**Print Form** 



# City Of Bloomington Housing and Neighborhood Development

# REMAINING VIOLATION INSPECTION REPORT

FEB 0 6 2020

5964

Owner Citadel Investment Trust 4810 E. Heritage Woods Road Bloomington, In 47401

Agent Mackie Properties P.O. Box 236 Elletsville, IN 47429

Prop. Location: 345 S Curry PIKE Number of Units/Structures: 32/4

Units/Bedrooms/Max # of Occupants: Bld 1: Bld 1: 8/2/5, Bld 2: 8/2/5, Bld 3: 8/2/5, Bld 4: 8/2/5

Date Inspected: 09/26/2019 Primary Heat Source: Gas Property Zoning: RH

Number of Stories: 2

Inspector: Matt Swinney

Foundation Type: Crawl Space

Attic Access: Yes

Accessory Structure: None

# REINSPECTION REQUIRED

This report is your final notice from the Housing and Neighborhood Development Office that this rental property continues to be in violation of the Residential Rental Unit and Lodging Establishment Inspection Program of Bloomington.

If you have made all of the repairs on this report, contact our office immediately to schedule the required re-inspection.

Failure to make repairs or to schedule the required re-inspection will result in this matter being referred to the City Legal Department. Legal action may be initiated against you under BMC 16.10.040

It is your responsibility to contact the Housing and Neighborhood Development Office to schedule the required re-inspection. Our mailing address and telephone number are listed below.

# INTERIOR

Building 1

Repair the entry door to be weather tight. No gaps shall be visible around the edges. BMC 16.04.060(a)

City Hall

401 N Morton St https://bloomington.in.gov/hand Housing Division (812) 349-3401

Bloomington, IN 47404 Rental Inspection (812) 349-3420 Fax (812) 349-3582



### Unit 3

Kitchen

Repair the entry door to be weather tight. No gaps shall be visible around the edges. BMC 16.04.060(a)

### **Building 2**

Both Common Hall and Stairways

Repair the emergency lights to function as intended. BMC 16.04.060(b)

# <u>Unit 15</u>

Living Room

Secure loose electrical receptacle. BMC 16.04.060(b)

# Unit 3<u>0 (vacant)</u>

Bath

Repair the GFCI outlet to function as intended (will not trip). BMC 16.04.060(b)

### Unit 32

North Bedroom

Repair the damaged window screen in the east window. BMC 16.04.060(a)

Repair both windows to latch securely. BMC 16.04.060(b)

# South Bedroom

Repair both windows to latch securely. BMC 16.04.060(b)

Remove the mold/mildew from the windows and frames. BMC 16.04.060(a)

### Unit 28

Living Room

Replace the deteriorated glazing compound on the east window (nothing is holding the glass in place). BMC 16,04.050(a)

Repair the windows to be weather tight. The sashes shall fit snugly and properly within the frame.

Replace any missing or deteriorated glazing compound. Windows shall be easily and fully openable and shall remain fully open using hardware that is part of the window. BMC 16.04.060(b)

### **BUILDING 3**

### **Both Common Hall and Stairways**

Repair the emergency lights to function as intended. BMC 16.04.060(b)

#### Unit 21

This unit was not inspected at the time of this inspection because the tenant was ill. This unit must be inspected and brought into compliance with-in the same 60 day deadline as the remainder of this property. BMC 16.03.040

#### Unit 24

South Bedroom

Repair both windows to function as intended (no latches, sashes very difficult to slide). BMC 16.04.060(b)

### North Bedroom

Inspect the HVAC ceiling vent in this room for blockages and ensure that it functions as intended. Tenant reports air flow from vent is very low. BMC 16.04.060(c)

<u>Unit 17</u>

South Bedroom

Repair window to latch securely. BMC 16.04.060(b)

# OTHER REQUIREMENTS

The following documents were not provided to the office or reviewed by the inspector within 60 days of the date of the inspection, and as such a <u>fine will be levied</u>:

• Tenants and Owners Rights and Responsibilities Summary

A completed copy of the Tenants and Owners Rights and Responsibilities Summary BMC 16.03.060(c) and BMC 16.10.030(b)

• Inventory & Damages List

The owner or his agent shall contact the tenant and arrange a joint inspection of the premises to occur within ten days of the tenant's occupancy of the rental unit. The owner or his agent and the tenant shall at that time jointly complete an inventory and damage list, and this shall be signed by all parties to the tenancy agreement. Duplicate copies of the inventory and damage list shall be retained by all parties and shall be deemed a part of the tenancy agreement.

BMC 16.03.050(e) and BMC 16.10.030(b)

When issued, a copy of the new Rental Occupancy Permit shall be posted as required by BMC 16.03.030(d): All rental units shall be required to have a current occupancy permit displayed in an accessible location inside the unit. The permit shall contain the name of the owner and the agent, the occupant load of the unit, the number of bedrooms, the expiration date of the permit, and any variances that have been granted for the property. BMC 16.03.030(c)

This is the end of this report on the cycle report. They

Or were gent through emily before the 60 days.

Were gent through emily before the 60 days.



# Board of Housing Quality Appeals Staff Report: Petition for Extension of Time

Meeting Date:

17 June 2020

Petition Type:

An extension of time to complete repairs

Petition Number:

20-TV-043

Address:

405 S Lincoln St

Petitioner:

Kathy Duckett

Inspector:

Michael Arnold

Staff Report:

03 April 2019 Cycle Inspection 11 April 2019 Mailed Report

11 April 2019 11 June 2019

Reinspection Scheduled

17 June 2019

Reinspection

20 June 2019

Temporary Permit

04 February 2020

Exterior Extension Reminder

03 April 2020

Painting Deadline

21 May 2020

Received BHQA Application

During the cycle inspection it was noted that exterior painting was required for compliance. The owner is requesting an additional three months to complete the painting.

Staff recommendation:

Grant the request

Conditions:

Complete all repairs and schedule for re-inspection no later than the deadline stated below, or this case will be turned over to the City of Bloomington Legal Department for further action including

the possibility of fines.

Compliance Deadline:

21 August 2020

Attachments:

Cycle Inspection, Application





# **Application For Appeal** To The **Board of Housing Quality Appeals** P.O. Box 100

Bloomington, IN 474 PECIET VIEW 812-349-3420

hand@bloomington.in.gov AY 2 1 2020

|   | To Tr.   |
|---|--|
| Property Address: 455 S. Lincoln  | St. BI.  |
| Petitioner's Name: Kathy Duckett  | •  |
| Address: 402 5 Lincoln St   |  |
| City: Bloomington State: IN   |  |
| Phone Number: 320-8364 E-mail Address: RIDE   | ELKA GIRLE Yahoo co  |
| Phone Number: 320-8364 E-mail Address: RIDE Owner's Name: Kathy Duckett - e   | some as politioner   |
| Address:  |  |
| City: State:  | Zîp Code:  |
| Phone Number: E-mail Address:   |  |
| Occupants: Dan Shaffer  | •  |
| <ul><li>The following conditions must be found in each case in order in the exception is consistent with the intent and purpose of health, safety, and general welfare.</li><li>That the value of the area about the property to which the exceptions.</li></ul>          | the housing code and promotes public reption is to apply will not be adversely |
| Identify the variance type that you are requesting from the f   | ollowing drop down menu:   |
| Variance Type: Extension of time +  | o complete repairs   |
| Reminder: A \$20.00 filing fee must be submitted with the Appeal Application or the application will not be considered to be complete! A completed application has to be submitted prior to the meeting application deadline in order to be placed on that months agenda! | (Will be assigned by BHQA) stition Number: $20 - TV - 43$                      |

In the space provided below please write a brief narrative regarding your request. Be specific as to what you are requesting, the reason(s) or justification(s) for your request, the amount of time needed to bring the property into compliance, as well as any modifications and/or alterations you are suggesting. The following information must be included dependent upon the type of variance you are requesting:

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- D. Rescind a variance. (Petition type: RV)
  - 1. Detail the existing variance.
  - 2. Specify the reason the variance is no longer needed.

| Repair Needed - Exterior scraping & painting.  |
|--|
| Most of the losse has been completed but the   |
| down some of the occupant have made  |
| to complete all surfaces by the deadline, He has been paid in advance to complete this |
|  |
| work. I must be complete   |
| Tour requesting 3 more months to complete the scroping & pointing. It is my hope that  |
| I all alle Box occidence il me to any ell  |
| this but is not it will give me time to find & hire a suitable point contractor.       |
| FIND & hime a suitable point contractor.   |
| e  |

Signature (Required):

Name (Print): Kathy Dukett

Date: 5-18

Important information regarding this application format:

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**Print Form** 

# City Of Bloomington Housing and Neighborhood Development

# CYCLE INSPECTION REPORT

1318

Owner(s)

Duckett, Kathy L. 402 S. Lincoln St. Bloomington, IN 47401

Prop. Location: 405 S Lincoln ST Number of Units/Structures: 1/1

Units/Bedrooms/Max # of Occupants: Bld 1: 1/3/5

Date Inspected: 04/03/2019 Primary Heat Source: Gas

Property Zoning: RM

Number of Stories: 1

Inspector: Mike Arnold Foundation Type: Basement

Attic Access: No

Accessory Structure: none

Monroe County records show this structure was built in 1908. There were no minimum emergency egress requirements at the time of construction.

# **Interior:**

### **Basement:**

No violations noted

### Main Level:

### Living Room 14-9 x 12-6):

The smoke detector in this room appears to be more than ten years old and the manufacturer will not guarantee it to provide adequate protection. Install a new smoke detector in an approved location. If wall mounted, it shall be located between 6 and 12 inches from the ceiling. If ceiling mounted, it shall be located at least 4 inches from the wall. IC 22-11-18-3.5

Repair window to latch securely. BMC 16.04.060(b) (West wall)

Secure loose electrical receptacle. BMC 16.04.060(b) (South wall)

# Kitchen (16-9 x 10-10), Bathroom:

No violations noted

### **SW Bedroom (15-10 x 13-0):**

### This room has a door to the exterior

The smoke detector in this room appears to be more than ten years old and the manufacturer will not guarantee it to provide adequate protection. Install a new smoke detector in an approved location. If wall mounted, it shall be located between 6 and 12 inches from the ceiling. If ceiling mounted, it shall be located at least 4 inches from the wall, IC 22-11-18-3.5

Provide operating power to the smoke detector. IC 22-11-18-3.5

# Center Bedroom (17-00 x 11-0):

Existing Egress:

Height: 34.5 inches Width: 32 inches Sill Height: 24 inches Openable Area: 7.66 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

Repair window to latch securely. BMC 16.04.060(b) (South wall)

# **SE Bedroom (11-0 x 8-4):**

Existing Egress:

Height: 33.5 inches Width: 32 inches Sill Height: 24 inches Openable Area: 7.22 sq. ft.

Note: These measurements are for reference only. There is no violation of the

emergency egress requirements.

The smoke detector in this room appears to be more than ten years old and the manufacturer will not guarantee it to provide adequate protection. Install a new smoke detector in an approved location. If wall mounted, it shall be located between 6 and 12 inches from the ceiling. If ceiling mounted, it shall be located at least 4 inches from the wall. IC 22-11-18-3.5

Provide operating power to the smoke detector. IC 22-11-18-3.5

Secure the glazing in the sashes. BMC 16.04.060(a) (South wall window)

### Exterior:

Scrape and paint exterior surfaces where paint is peeling or wood is exposed. BMC 16.04.050(e) This item has a deadline of 03 April 2020)

### Other Requirements:

# **Furnace Inspection Documentation:**

Thoroughly clean and service the furnace, inspect and test shut off valves for proper operation. Documentation from a professional HVAC contractor for this service is acceptable and encouraged. Servicing shall include a test for carbon monoxide. Acceptable levels of carbon monoxide are as follows:

Desired level:

0 parts per million (ppm)

Acceptable level in a living space:

9 ppm

Maximum concentration for flue products:

50 ppm

BMC 16.01.060(f), BMC 16.04.060(c), BMC 16.04.060(b)

When issued, a copy of the new Rental Occupancy Permit shall be posted as required by BMC 16.03.030(d): All rental units shall be required to have a current occupancy permit displayed in an accessible location inside the unit. The permit shall contain the name of the owner or his agent and the expiration date of the permit. BMC 16.03.030(c)

This is the end of this report.