



CITY OF NAPOLEON – Building & Zoning Division

255 W. Riverview Avenue, PO Box 151, Napoleon, OH 43545

Phone: 419-592-4010 - Fax: 419-599-8393

BUILDING & ZONING DIVISION

Zoning Administrator
Building Commissioner
Brent N. Damman

December 5, 2003

Mr. Lester Shelt
813 Scott St.
Napoleon, Ohio 43545

Re. Property Maintenance Code violations @ 905 N. Perry Street Napoleon, Ohio.

Dear Mr. Shelt

This letter is to inform you that today upon inspection of the subject premises we have found the following Property Maintenance Code violations;

1. Property Maintenance section PM- 304.11(Exterior stairways, decks, porches & balconies) apartments 1, 2, 3, 4 & 6 do not have proper stairways, decks, porches & balconies meeting the requirements of this code section.
2. Property Maintenance section PM- 304.13(Exterior handrails & guards) apartments 1, 2, 3, 4, & 6 do not have proper handrails & guards meeting the requirements of this code section.
3. Property Maintenance section PM- 305.5(Interior stairways, & railings) apartments B-1, B-2, B-3, B-4 & B-5 do not have proper stairways & railings meeting the requirements of this code section.
4. Property Maintenance section PM- 305.6 & PM-305.7(Interior stairways, walking surfaces, handrails & guards) apartments B-1, B-2, B-3, B-4 & B-5 do not have proper surfaces, railings & guards meet the requirements of these code sections.
5. Property Maintenance section PM- 403.1(Habitable spaces) apartments B-1, B-2, B-3, B-4 & B-5 do not have proper lighting meeting the requirements of this code section.

6. Property Maintenance section PM- 404.1 (Habitable spaces) apartments do not have proper ventilation meeting the requirements of this code section.
7. Property Maintenance section PM-602.1, PM-602.2, PM-602.2.1 (Heating Facilities) apartments B-2, B-4, B-5, #1, #2, #6 do not have adequate heating facilities meeting the requirements of these code sections.
8. Property Maintenance section PM-603.1, PM-603.5, PM-603.7, PM-602.2.1 (Mechanical Equipment) apartments B-2, B-4, B-5, #1, #2, #6 do not meet the requirements of these code sections.
9. Property Maintenance section PM- 604.3, PM-605.1, PM-605.2, PM-605.3 (Electrical Facilities & Equipment) apartments B-2, B-4, B-5, #1, #2, #6 have many electrical hazards and do not meet the requirements of these code sections.
10. Property Maintenance section PM-702.9 (Interior & Exterior stairways, handrails & guardrails) apartments B-1, B-2, B-3, B-4 & B-5 do not have properly maintained stairways, handrails or guardrails meeting the requirements of this code section.
11. Property Maintenance section PM-702.12 (Emergency Escape) apartment's B-1, B-2, B-3, B-4, B-5 & #2, do not have proper means of emergency egress meeting the requirements of this code section.
12. Property Maintenance section PM-704.0 (Fire Resistance Ratings) the entire base floor areas do not have fire rated wall coverings or fire rated ceiling coverings and subsequently do not meet the requirements of this code section.
13. Property Maintenance section PM-705.4 (Fire Extinguishers) the apartment building does not adequate numbers or properly maintained fire extinguishing equipment and subsequently the building does not meet the requirements of this code section.
14. Property Maintenance section PM-705.5 (Smoke Detectors) apartment's B-1, B-2, B-3, B-4, B-5, #1, #2, & #6 do not have smoke detectors meeting the requirements of this code section.

Due to the nature of some of the hazards sited in the basement (lower) level they are considered to be of imminent danger, in accordance with code section PM-108 and under the authority of PM-109.1, I hereby order you to vacate the occupants of the basement (lower) immediately. The basement (lower) level floor is hereby condemned and not fit for human occupancy.

In the event you do not comply with this order immediately, we will take the necessary measures to accomplish the objective. The basement area may be re-occupied but only after all repairs listed herein are made in strict compliance with all applicable building codes. (I have attached a complete copy of the City Property Maintenance Code for your information). You have the right to an appeal regarding the particulars of this order (according to code section PM-111.0) however it does not allow a stay of this order.

Penalties; any person who shall violate a provision of this code shall, upon conviction thereof, be subject to fines of up to \$500.00 and up to 60 days in imprisonment for each offense, each day the violations continue shall constitute a separate offense.

Sincerely

A handwritten signature in cursive script, appearing to read "Brent N. Damman".

Brent N. Damman
Building Commissioner

Cc. Mr. David Grahn, Law Director City of Napoleon
Mr. Lynn Hancock, Fire Chief



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*Walk through code violation check 1st floor w/ Joe Stout
12-12-03
*Basement
Totally evacuated 12-12-03, Locks on doors
& secured*

6. Property Maintenance section PM- 404.1 (Habitable spaces) apartments do not have proper ventilation meeting the requirements of this code section.
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Brent N. Damman
Building Commissioner

Cc. Mr. David Grahn, Law Director City of Napoleon
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DIVISION**

Zoning Administrator
Building Commissioner
Brent N. Damman

December 5, 2003

Mr. Lester Shelt
813 Scott St.
Napoleon, Ohio 43545

Post-it® Fax Note	7671	Date	# of pages ▶
To	Jim Silicki	From	
Co./Dept.		Co.	
Phone #	419 724-6146	Phone #	
Fax #		Fax #	

Sorry Jim we had fax trouble

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Mr. Lynn Hancock, Fire Chief

A		MM DD YYYY 35015 OH 12 05 2003 800 03-0000820 000	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> No Activity	NFIRS -1 Basic	
B Location*					
<input type="checkbox"/> Check this box to indicate that the address for this incident is provided on the Wildland Fire Census Tract Module in Section B "Alternative Location Specification". Use only for Wildland Fires.					
<input checked="" type="checkbox"/> Street address <input type="checkbox"/> Intersection <input type="checkbox"/> In front of <input type="checkbox"/> Rear of <input type="checkbox"/> Adjacent to <input type="checkbox"/> Directions					
905 N Perry ST Number/Milepost Prefix Street or Highway Street Type Suffix Napoleon OH 43545 Apt./Suite/Room City State Zip Code Cross street or directions, as applicable					
C Incident Type *		E1 Date & Times		E2 Shift & Alarms	
551 Assist police or other		Midnight is 0000 Check boxes if dates are the same as Alarm Date. ALARM always required Alarm * 12 05 2003 16:30:00 ARRIVAL required, unless canceled or did not arrive <input checked="" type="checkbox"/> Arrival * 12 05 2003 16:35:00 CONTROLLED Optional, Except for wildland fires <input checked="" type="checkbox"/> Controlled 12 05 2003 17:00:00 LAST UNIT CLEARED, required except for wildland fires <input checked="" type="checkbox"/> Last Unit <input checked="" type="checkbox"/> Cleared 12 05 2003 17:00:00		Local Option B 01 CITT Shift or Alarms District Platoot.	
D Aid Given or Received*		E3 Special Studies			
1 <input type="checkbox"/> Mutual aid received 2 <input type="checkbox"/> Automatic aid recv. 3 <input type="checkbox"/> Mutual aid given 4 <input type="checkbox"/> Automatic aid given 5 <input type="checkbox"/> Other aid given N <input checked="" type="checkbox"/> None		Local Option Special Study ID# Special Study Value			
F Actions Taken *		G1 Resources *		G2 Estimated Dollar Losses & Values	
60 Systems and services, Primary Action Taken (1) Additional Action Taken (2) Additional Action Taken (3)		<input checked="" type="checkbox"/> Check this box and skip this section if an Apparatus or Personnel form is used. Apparatus Personnel Suppression EMS Other 0001 0001 <input type="checkbox"/> Check box if resource counts include aid received resources.		LOSSES: Required for all fires if known. Optional for non fires. None Property \$, 000 , 000 Contents \$, 000 , 000 PRE-INCIDENT VALUE: Optional Property \$, 000 , 000 Contents \$, 000 , 000	
Completed Modules		H1* Casualties		H3 Hazardous Materials Release	
<input type="checkbox"/> Fire-2 <input type="checkbox"/> Structure-3 <input type="checkbox"/> Civil Fire Cas.-4 <input type="checkbox"/> Fire Serv. Cas.-5 <input type="checkbox"/> EMS-6 <input type="checkbox"/> HazMat-7 <input type="checkbox"/> Wildland Fire-8 <input checked="" type="checkbox"/> Apparatus-9 <input checked="" type="checkbox"/> Personnel-10 <input type="checkbox"/> Arson-11		Deaths Injuries Fire Service Civilian H2 Detector Required for Confined Fires. 1 <input type="checkbox"/> Detector alerted occupants 2 <input type="checkbox"/> Detector did not alert them U <input type="checkbox"/> Unknown		N <input type="checkbox"/> None 1 <input type="checkbox"/> Natural Gas: slow leak, no evacuation or HazMat actions 2 <input type="checkbox"/> Propane gas: <21 lb. tank (as in home BBQ grill) 3 <input type="checkbox"/> Gasoline: vehicle fuel tank or portable container 4 <input type="checkbox"/> Kerosene: fuel burning equipment or portable storage 5 <input type="checkbox"/> Diesel fuel/fuel oil: vehicle fuel tank or portable 6 <input type="checkbox"/> Household solvents: home/office spill, cleanup only 7 <input type="checkbox"/> Motor oil: from engine or portable container 8 <input type="checkbox"/> Paint: from paint cans totaling < 55 gallons 0 <input type="checkbox"/> Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form	
J Property Use*		I Mixed Use Property			
Structures 131 <input type="checkbox"/> Church, place of worship 161 <input type="checkbox"/> Restaurant or cafeteria 162 <input type="checkbox"/> Bar/Tavern or nightclub 213 <input type="checkbox"/> Elementary school or kindergarten 215 <input type="checkbox"/> High school or junior high 241 <input type="checkbox"/> College, adult education 311 <input type="checkbox"/> Care facility for the aged 331 <input type="checkbox"/> Hospital Outside 124 <input type="checkbox"/> Playground or park 655 <input type="checkbox"/> Crops or orchard 669 <input type="checkbox"/> Forest (timberland) 807 <input type="checkbox"/> Outdoor storage area 919 <input type="checkbox"/> Dump or sanitary landfill 931 <input type="checkbox"/> Open land or field		341 <input type="checkbox"/> Clinic, clinic type infirmary 342 <input type="checkbox"/> Doctor/dentist office 361 <input type="checkbox"/> Prison or jail, not juvenile 419 <input type="checkbox"/> 1-or 2-family dwelling 429 <input checked="" type="checkbox"/> Multi-family dwelling 439 <input type="checkbox"/> Rooming/boarding house 449 <input type="checkbox"/> Commercial hotel or motel 459 <input type="checkbox"/> Residential, board and care 464 <input type="checkbox"/> Dormitory/barracks 519 <input type="checkbox"/> Food and beverage sales 936 <input type="checkbox"/> Vacant lot 938 <input type="checkbox"/> Graded/care for plot of land 946 <input type="checkbox"/> Lake, river, stream 951 <input type="checkbox"/> Railroad right of way 960 <input type="checkbox"/> Other street 961 <input type="checkbox"/> Highway/divided highway 962 <input type="checkbox"/> Residential street/driveway		NN <input type="checkbox"/> Not Mixed 10 <input type="checkbox"/> Assembly use 20 <input type="checkbox"/> Education use 33 <input type="checkbox"/> Medical use 40 <input type="checkbox"/> Residential use 51 <input type="checkbox"/> Row of stores 53 <input type="checkbox"/> Enclosed mall 58 <input type="checkbox"/> Bus. & Residential 59 <input type="checkbox"/> Office use 60 <input type="checkbox"/> Industrial use 63 <input type="checkbox"/> Military use 65 <input type="checkbox"/> Farm use 00 <input type="checkbox"/> Other mixed use 539 <input type="checkbox"/> Household goods, sales, repairs 579 <input type="checkbox"/> Motor vehicle/boat sales/repair 571 <input type="checkbox"/> Gas or service station 599 <input type="checkbox"/> Business office 615 <input type="checkbox"/> Electric generating plant 629 <input type="checkbox"/> Laboratory/science lab 700 <input type="checkbox"/> Manufacturing plant 819 <input type="checkbox"/> Livestock/poultry storage (barn) 882 <input type="checkbox"/> Non-residential parking garage 891 <input type="checkbox"/> Warehouse 981 <input type="checkbox"/> Construction site 984 <input type="checkbox"/> Industrial plant yard	
Lookup and enter a Property Use code only if you have NOT checked a Property Use box: Property Use 429 Multifamily dwellings NFIRS-1 Revision 03/11/99					

K1 Person/Entity Involved

Local Option

Business name (if applicable)

Area Code

Phone Number

 Check This Box if same address as incident location. Then skip the three duplicate address lines.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number	Prefix	Street or Highway			Street Type	Suffix			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Post Office Box	Apt./Suite/Room		City						
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
State	Zip Code								

 More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary
K2 Owner
 Same as person involved? Then check this box and skip The rest of this section.

Local Option

Business name (if Applicable)

Area Code

Phone Number

 Check this box if same address as incident location. Then skip the three duplicate address lines.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number	Prefix	Street or Highway			Street Type	Suffix			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Post Office Box	Apt./Suite/Room		NAPOLEON						
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
State	Zip Code								

L Remarks

Local Option

Assist Brent Daman (City of Napoleon Building Inspector) with installing 6 smoke detectors at 905 N. Perry Street. Two Smoke alarms were installed in Apt B-1 (detector at the Kitchen and East Bedroom area and Rear bed/living area). A detector was installed in Apt B-5 in the kitchen/ bath area. And three detectors were installed in the hall way/ functional areas. (one installed by the front/south entrance, one on the rafters in front of the utility room. and a detector was installed on the rear west hall by the electric room.

12/05/2003 17:21:31 Eric Rohrs

L Authorization

officer in charge ID

Rohrs, Eric E

Signature

Position or rank

Assignment

Month

Day

Year

 Check Box if same as Officer in charge.

Member making report ID

Rohrs, Eric E

Signature

Position or rank

Assignment

Month

Day

Year

35015
FDID *

OH
State *

MM DD YYYY
12 5 2003
Incident Date *

800
Station

03-000820
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

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