

39. Smoke detector Information:

Smoke detector(s) Y
Properly located Y
*Hard-Wired *Y

*if N or H see note on p. 3, item 39

Disclosure Report
St. Paul Truth-In-Sale of Housing
(Carefully read this entire report)

Office Use, ONLY:

Date Received

Payment Ref:

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF ST. PAUL OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: 2439 Como Ave.
Addresses without the correct street type and/or direction may be returned and may incur a late fee.

Owner's Name: Denise Abel and Greg Closter

Owner's Address: 2439 Como Ave., St. Paul, MN 55108

Current Usage of this dwelling: [X] Single Family [] Townhouse [] Condo* [] Duplex [] Other
Usage may not be legal. See below.
*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use area, or other residential areas of the structure.

Comments:

PROPERTY LOCATION AND POSSIBLE USE RESTRICTION INFORMATION

If a box is not checked then the information does not apply to this dwelling. This information is not guaranteed by the evaluator nor by the City of St. Paul.

According to information provided to Truth-In-Sale of Housing Evaluators by the City of St. Paul this property:

* [] IS A Registered Vacant Building. The conditions applicable to a sale are different by Category:
Even if this box is not now marked this dwelling may become a vacant building before the 1 year expiration date of this report.
Cat 1: New owners must re-register the building and pay all outstanding fees and obtain permission for occupancy.
Written permission from the City of Saint Paul is required before a Cat 2 or Cat 3 VB can be sold.
Cat 2: Requirements include: 1. register/re-register the building, 2. Pay outstanding fees, 3. obtain a code compliance report, 4. submit for approval a rehab cost estimate from a licensed contractor and a schedule for completion of all code compliance work, 5. submit proof of financial responsibility acceptable to the City.
Cat 3: All above requirements AND obtain a Certificate of Occupancy or Certificate of Code Compliance before sale.
* NOTICE: A VB status and/or category can change at any time. You must contact the City's Vacant Buildings division at 651-266-1900 to be sure you are fully informed of all the conditions and requirements that may affect the sale of this property.

- [] IS located within a St. Paul Heritage Preservation District or is individually designated as a Saint Paul Heritage Preservation Site. Review and approval of exterior work (excluding painting), modifications, additions and demolition is required by the Heritage Preservation Commission and city staff. For questions regarding Heritage Preservation call the City's information line at 651-266-8989.
[] HAS Open permits. Go to the DSI website (see below), click on "Look Up Property Information" to view information. Completion and/or occupancy restrictions or requirements may apply. Call 651-266-9090 for permit information.
[] IS a Verified Legal Duplex. If this dwelling is in use as a duplex and this box is not checked, contact DSI Zoning at 651-266-9008 for the most recent information. Reseach into a property's history may incur a fee.

You may obtain a printout of all this information by visiting the DSI website, then enter the property address as directed: www.stpaul.gov > Government > Department of Safety & Inspections, then click on "Look Up Property Information"

This Report:

- 1. is intended to provide basic information to the home buyer and seller prior to the time of sale. This report WILL NOT be used to enforce the requirements of the Legislative Code; however, this evaluation form will be used by the Fire Department to determine if there is compliance with the requirements for hard-wired smoke detectors.
2. is based on the current Truth-in-Sale of Housing Evaluator Guidelines, and is based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
3. is not warranted, by the City of St. Paul, nor by the evaluator for the condition of the building component, nor of the accuracy of this report.
4. covers only the items listed on the form and only those items visible at the time of the evaluation. The Evaluator is not required to operate the heating plant (except during the heating season), use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
5. is valid for one year from the date of issue and only for the owner named on this report.

Questions regarding this report should be directed to the evaluator. Complaints regarding this report should be directed to Department of Safety and Inspections, Truth-in-Sale of Housing Program, Phone No. 651-266-1900.

EVALUATOR: PHONE: DATE: 03/07/2011 Rev 3/2009

Address 2439 COMO AVE. Date 03/07/2011 Page 1 of 4

Property Address: 2439 Como Ave.

Rating Key: M=Meets minimum B=Below minimum C=See Comment H=Hazardous Y=Yes N=No NV=Not Visible/Viewed NA=Not Applicable

Item # Comments
Specify location(s), where necessary

BASEMENT/CELLAR

- 1. Stairs and handrails B
- 2. Basement/cellar floor M
- 3. Foundation C
- 4. Evidence of dampness or staining N
- 5. First floor, floor system M
- 6. Beams and columns M

- 1. *B Low headroom (less than 6' 8")*
- 3. *C Finished walls limit view of foundation.*

ELECTRICAL SERVICE(S) # of Services . 1

- 7. Service size:
Amps: 30 _____ 60 _____ 100 X 150 _____ Other _____
Volts: 115 _____ 115/220 X

- 8. *B Electrical panel not fully indexed.*
- 9. *B Surface wiring of electrical romex to joists.*

BASEMENT ONLY:

- 8. Electrical service installation/grounding B
- 9. Electrical wiring, outlets and fixtures B

PLUMBING SYSTEM

- 10. Floor drain(s) (basement) M
- 11. Waste and vent piping (all floors) M
- 12. Water piping (all floors) B
- 13. Gas piping (all floors) C
- 14. Water heater(s), installation M
- 15. Water heater(s), venting M
- 16. Plumbing fixtures (basement) M

- 12. *B Leaking water pipe next to water meter in basement.*
- 13. *C Can't view gas piping at stove (concealed)*

HEATING SYSTEM(S) # of 1

- 17. Heating plant(s): Type: Air Fuel: Gas
 - a. Installation and visible condition M
 - b. Viewed in operation (required in heating season) ... Y
 - c. Combustion venting M

The Evaluator is not required to operate the heating plant(s),
except during heating season, between October 15 and April 15.

- 18. Additional heating unit(s) Type: _____ Fuel: _____
 - a. Installation and visible condition -
 - b. Viewed in operation -
 - c. Combustion venting -

19. **ADDITIONAL COMMENTS (1 through 18)** C

- 19. *C Storage items in basement limit view of walls.*

EVALUATOR: _____ DATE: 03/07/2011

Property Address: 2439 Como Ave.

Rating Key: M=Meets minimum B=Below minimum C=See Comment H=Hazardous Y=Yes N=No NV=Not Visible/Viewed NA=Not Applicable

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

Item # Comments

KITCHEN

- 20. Walls and ceiling M
- 21. Floor condition and ceiling height M
- 22. Evidence of dampness or staining N
- 23. Electrical outlets and fixtures M
- 24. Plumbing fixtures B
- 25. Water flow M
- 26. Window size/openable area/mechanical exhaust M
- 27. Condition of doors/windows/mech. exhaust ... M

24. B Dishwasher drainage connected to sink drain on wrong side of drain trap.

LIVING AND DINING ROOM(S)

- 28. Walls and ceiling M
- 29. Floor condition and ceiling height M
- 30. Evidence of dampness or staining N
- 31. Electrical outlets and fixtures B
- 32. Window size and openable area M
- 33. Window and door condition M

31. B Reversed polarity on outlet east wall of living room.

HALLWAYS, STAIRS AND ENTRIES

- 34. Walls, ceilings, floors M
- 35. Evidence of dampness or staining N
- 36. Stairs and handrails to upper floors M
- 37. Electrical outlets and fixtures B
- 38. Window and door condition M
- 39. Smoke detector(s) Y
- Properly located Y
- * Hard-wired (HWSD) Y

37. B Loose electrical outlet in stairway.

*if N or H in a single family home then SPFire Dept requires HWSD installation

BATHROOM(S)

- 40. Walls and ceiling M
- 41. Floor condition and ceiling height M
- 42. Evidence of dampness or staining N
- 43. Electrical outlets and fixtures M
- 44. Plumbing fixtures M
- 45. Water flow M
- 46. Window size/openable area/mechanical exhaust M
- 47. Condition of windows/doors/mech. exhaust ... M

52. B Bedroom windows lack proper egress size.
53. B Broken sash cord on window upper bedroom.

SLEEPING ROOM(S)

- 48. Walls and ceiling M
- 49. Floor condition, area, and ceiling height ... M
- 50. Evidence of dampness or staining N
- 51. Electrical outlets and fixtures M
- 52. Window size and openable area B
- 53. Window and door condition B

54. B Floor boards warping in basement room.

ENCLOSED PORCHES AND OTHER ROOMS

- 54. Walls, ceiling, and floor, condition B
- 55. Evidence of dampness or staining N
- 56. Electrical outlets and fixtures M
- 57. Window and door condition M

ATTIC SPACE (Visible Areas)

- 58. Roof boards and rafters C
- 59. Evidence of dampness or staining NA
- 60. Electrical wiring/outlets/fixtures NA
- 61. Ventilation NA
- 62. **ADDITIONAL COMMENTS (20 through 61)** H

58. C Attic space not visible, finished rooms and knee wall access sealed shut.

CO Detector information reported here

62. H Missing carbon monoxide detector within 10 feet of bedrooms main floor and upper bedroom.

EVALUATOR: _____

DATE: 03/07/2011

