



Department of Neighborhood Services

Preston D. Cole
Commissioner

Thomas Mishefske
Operations Director

Michael Mazmanian
Operations Director

April 5, 2019

Alderman Mark A. Borkowski, Chair
Judiciary and Legislation Committee
Office of the City Clerk
Room 205, City Hall

RE: File No.: 181799
Address: 2878 N. 22nd Street

Dear Alderman Borkowski:

The owner of the above-referenced property has applied for a vacation of In Rem judgment. The Department of Neighborhood Services has no outstanding charges and does not object to the request.

However, the building was placarded as unfit for human habitation on January 15, 2013. On November 16, 2016, the owner applied for an Occupancy permit, however the associated inspections were not completed and it was cancelled after two years. Therefore, if the Common Council approves the return of the property, the building cannot be occupied until all the violations causing the placard have been cured, the placard has been removed, and an Occupancy permit has been issued by DNS.

Sincerely,

Emily McKeown
Business Operations Manager



4. 275-53
Repair or replace defective plumbing system. Every plumbing fixture and water and waste pipe shall be properly installed and maintained in a good, sanitary, working condition. Restore plumbing system to an operable condition - Permit required.
5. 275-54
Repair or replace defective water supply system. Water supply systems shall be installed and maintained to provide at all times a supply of water to plumbing fixtures, devices and appurtenances in sufficient volume and at a pressure adequate to enable them to function satisfactorily. Restore an adequate supply of water to the premises.
6. 275-61
Repair or replace defective heating system. Restore heating system to a safe and operable condition capable of adequately heating all habitable rooms, bathrooms and toilet rooms to a temperature of at least 67 degrees Fahrenheit continuously during periods of occupancy. (Permit required if replacing heating system; call 286-3361 if you need permit information.)
7. 214-27
Provide, install and properly maintain approved smoke detector(s) installed in a manner and location consistent with its listing and at least one detector in the basement and on each floor level except unfinished attic or storage areas and within 6 feet of each sleeping area. If a floor level contains 2 or more sleeping areas, each sleeping area shall be provided with a smoke detector.
8. 20-02
Listed and labeled carbon monoxide alarms shall be installed at locations specified in s.101.149(2), Stats., and maintained in accordance with s. 101.149 (3), Stats., in buildings which are residential buildings or include residential buildings, and contain fuel burning appliances, except as provided in subd. 4. PROVIDE REQUIRED CARBON MONOXIDE ALARMS.
9. 275-53-2
Provide approved vent pipe for water heater.

For any additional information, please phone **Inspector Robert Lannin** at [414]-286-5457 between the hours of 7:00am-9:00am or 4:00pm-5:00pm Monday through Thursday.

Per Commissioner of Neighborhood Services By-



Robert Lannin
Inspector

FAILURE TO COMPLY

Failure to correct the violations noted herein within the time set, or failure to comply with the order as modified by an appellate board and maintain compliance, may subject you to prosecution and to daily penalties of \$150 to \$10,000 in the manner provided in Section 200-19.

REINSPECTION FEES

In accordance with Section 200-33-48, a fee may be charged for any reinspection, except no fee shall be charged for the final reinspection when compliance is recorded. The fee is \$50.70 for the first reinspection, \$76.05 for the second, \$202.80 for the third, and \$354.90 for the fourth and all subsequent reinspections. These fees include a 1.4% training and technology surcharge. Reinspection fees shall be a lien upon the real estate where the reinspections were made and shall be assessed and collected as a special tax. If you wish to contest the assessment of a reinspection fee, contact the inspector, and, if necessary, the inspector's supervisor. If no agreement is reached, an appeal form will be mailed to you, which you can complete and send to the City's Administrative Review Appeals Board. Any question regarding the actual appeal process, please contact the Administrative Review Appeals Board at (414) 286-2221. Please be aware that there is a fee required when filing an appeal.

RIGHT TO APPEAL

You may appeal to the Commissioner for review of the reasonableness of this order within the time specified for compliance. Contact the Commissioner's Office at 414-286-2543 in order to file an appeal.

TRADUCCION EN ESPAÑOL

Si Ud. necesita ayuda para la traducción de esta información, comuníquese con el 'Centro Hispano' Council for the Spanish Speaking, Inc., 614 W. National Avenue, Milwaukee, WI 53204. Teléfono: (414)384-3700, o Community Advocates, 4906 W. Fond du Lac ave., Milwaukee, WI, 53216, Teléfono: (414)449-4777.

LUS HMOOB

Yog koj xav tau kev pab txhais cov lus no, thov hu mus rau koomhaum Hmong/American Friendship Association, 3824 West Vliet Street, Milwaukee, WI 53208, xovtooj yog (414) 344-6575.

Copies:

CHRIS ORE, SEAWAY BANK, 2102 W FONDULAC AVE , MILWAUKEE WI 53206

Page 1
City of Milwaukee
Department of Neighborhood Services
CHRONOLOGICAL RECORD OF ENFORCEMENT

SERIAL NO. 9962791

ADDRESS 2878 N 22ND ST

DATE OF INSPECTION 1-15-13

DATE	ACTIVITY AND REMARKS	INITIALS
	ORDERS MAILED FIRST CLASS.	
1-15-13	Fire inspection placard ISSUED	BC
1-16-13	Placard on bus posted A 4 units Spoke with All but upper East	
	I received a call from _____ Phone # _____	
	OR	
	I called _____ Phone # _____	
	I Spoke to: _____	
	If contact is not owner, explain: _____	
	I Verified the following information:	
	A) Owners name Yes <input type="checkbox"/> No <input type="checkbox"/>	
	B) Phone number Yes <input type="checkbox"/> No <input type="checkbox"/>	
	C) Mailing Address Yes <input type="checkbox"/> No <input type="checkbox"/>	
	If no, correct address is _____	
	Copy mailed to new address Yes <input type="checkbox"/> No <input type="checkbox"/>	
	D) Receipt of orders Yes <input type="checkbox"/> No <input type="checkbox"/>	
	E) Explained reinsp. fee policy Yes <input type="checkbox"/> No <input type="checkbox"/>	
1-15-13	Spoke with Demirgus A Thompson in LAUREN AC, @ 414-419-8800 at 16:45 advised him of order. He stated that property had been taken away from him in December 2012. I advised of placard procedure ect. If then call Chas Ole @ sea way bank aka applying of order.	BC ↑ BC
1-16-13	Posted placard & advised in person All units but upper East (2125A).	BC
1-17-13	Called Henry Redmond @ 913-2749 explained what he did receive posting and understand	BC
1-17-13	Spoke w/ Bobby Bonds of MAINT Co I said I would allow them to secure building fully and that city would not be responsible for payment.	BC
1-17-13	Spoke w/ Cory @ CPU 5 they will be at scene 11:30	BC
1-17-13	Called Milwaukee Water Dept - they will shut off at street after 11:30 AM.	BC
1-17-13	WE Energies (Chad) will cut gas & elect. at 11:30 AM	BC

If no compliance, rent withholding app. left with tenant(s)? YES/DATE _____
 Info letter sent to tenant? Yes/Date _____
 Unit(s) _____
 No _____
 Unit(s) _____
 No _____



City of Milwaukee
 Department of Neighborhood Services
 CHRONOLOGICAL RECORD OF ENFORCEMENT

DNS-36C

SERIAL NO. 9962791

ADDRESS

2878 N. 22ND ST

DATE OF INSPECTION 1-15-13

DATE	ACTIVITY AND REMARKS	TYPE OF CONTACT	INSP. NUMBER	INITIALS
2-14-13	<p>Allowed bond to open ME unit to have personal belongings removed. Diane said photo I'd be used - As I was checking on property found bond people in other areas of building. Clearing out - HAD removed furniture from lower west & loaded into their truck - I ordered it put back & waited til it was.</p>			
2-18-13	<p>NIXIE 530 SE 1 00 02/11/13 RETURN TO SENDER UNCLAIMED UNABLE TO FORWARD BC: 53221170401 *1825-00469-16-39 [Barcode]</p>			
	<p>Returned mail unclaimed had Jerry Thompson on box at Post office - 2nd notice for letter was 1/28-</p>			BC

Date 1-15-13



City of Milwaukee
Department of Neighborhood Services
PLACARD INVESTIGATION WORKSHEET

Address 2878 N 22nd St.

Electrical	Plumbing	Water Supply	Heating
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Lacking Service	<input checked="" type="checkbox"/> Lacking System	<input checked="" type="checkbox"/> Lacking Service <i>HOT</i>	<input type="checkbox"/> Lacking Service
<input checked="" type="checkbox"/> Defective Electrical	<input checked="" type="checkbox"/> Defective System	<input checked="" type="checkbox"/> Defective Service	<input checked="" type="checkbox"/> Defective Service
<input type="checkbox"/> Tampered Electric Meter	<input type="checkbox"/> Obstructed System	<input type="checkbox"/> Tampered Water Meter	<input type="checkbox"/> Tampered Gas Meter
<input checked="" type="checkbox"/> Photos taken	<input checked="" type="checkbox"/> Photos taken	<input checked="" type="checkbox"/> Photos taken	<input checked="" type="checkbox"/> Photos taken

Hazards	Illegal Occupancy	Structural Failure	Conditions
<input type="checkbox"/> Not Applicable	<input checked="" type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Storage/Obstruction	<input type="checkbox"/> Illegal Occupancy	<input type="checkbox"/> Foundation	<input checked="" type="checkbox"/> Unsanitary/Infestation
<input checked="" type="checkbox"/> Combustible/Flammable	<input type="checkbox"/> Attic / Basement	<input type="checkbox"/> Structure	<input checked="" type="checkbox"/> Unsafe
<input type="checkbox"/> Unidentified Substances	<input type="checkbox"/> Rooming House	<input checked="" type="checkbox"/> Weather Tight	<input checked="" type="checkbox"/> Non Habitable
<input checked="" type="checkbox"/> Photos taken	<input type="checkbox"/> Photos taken	<input type="checkbox"/> Photos taken	<input checked="" type="checkbox"/> Photos taken

Defective Fire Prevention / Life Safety			
<input checked="" type="checkbox"/> Smoke Detectors	<input checked="" type="checkbox"/> Combustible Waste	<input checked="" type="checkbox"/> Exposed Wiring	<input checked="" type="checkbox"/> Fire Extinguishers
<input checked="" type="checkbox"/> CO Detectors	<input type="checkbox"/> Hazardous Material	<input checked="" type="checkbox"/> Exposed Electric Panel	<input type="checkbox"/> Obstructed Egress
<input checked="" type="checkbox"/> Fire Alarm	<input type="checkbox"/> Excessive Fire Load	<input type="checkbox"/> Extension Cords	<input type="checkbox"/> Exit Door Defective

Placard to Owner	Placard to Tenant	Contact Supervisor
<input type="checkbox"/> Immediate	<input type="checkbox"/> Commercial	Name <u>MARIO HERNANDEZ</u>
<input checked="" type="checkbox"/> Scheduled	<input checked="" type="checkbox"/> Residential	Time Approval <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

OWNER	<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Agent <input type="checkbox"/> Not Recorded	<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Agent <input type="checkbox"/> Not Recorded
	Name	Name
	Phone No.	Phone No.
	TIME	TIME
	Notification: <input type="checkbox"/> Disconnected <input type="checkbox"/> LVM <input type="checkbox"/> Advised	Notification: <input type="checkbox"/> Disconnected <input type="checkbox"/> LVM <input type="checkbox"/> Advised
	Notes:	Permits <input type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> N/A
		Violations <input type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> N/A
	Complaints <input type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> N/A	

DEPARTMENTS	We Energies	City of Milwaukee Police Department
	Name <input type="checkbox"/> On Scene	Name <input type="checkbox"/> On Scene
	Phone No. TIME	Phone No. TIME
	Notes:	<input type="checkbox"/> Cleared Property
	Community Advocates	DPW Board up Crew
	Name <u>Schwanna C.</u> <input type="checkbox"/> On Scene	Name
	Phone No. <u>901-4497</u> TIME <u>12:15 pm</u>	Phone No.
	Notes: <u>She will call 3w phases today & get info - Take packets out 1/17.</u>	PROPERTY SECURED <input type="checkbox"/> By Owner <input type="checkbox"/> By DPW
		<input type="checkbox"/> Full Wrap <input type="checkbox"/> Hasp & Lock <input type="checkbox"/> Other

Date 1/15/13 Serial No. 9962791



City of Milwaukee
Department of Neighborhood Services
PLACARD CHRONOLOGICAL OF
PLACARD ENFORCEMENT

Address 2878 N 22nd St.

Investigation / Findings Complaint Police / CPU Investigation Self Initiated

Occupants	Unit/ Address	No. Children / No Adults
Kera Johnson DOB 5 28 83	2878 N 22nd LOWER West	1-14/0 1
Reginald Metcalf 9-11-68	2878A N 22nd UPPER West	1 Adult, 219
Kevin Cooper + Jamika Jackson	2125 W. Locust L. East - 1C 2A	
Henry Redmond 813-2749	2125A W. Locust UPPER EAST	1 A

No phone
808-1969
502-5928

DATE	ACTIVITY AND REMARKS	INITIALS
1/16/13	PLACARD ORDERS MAILED CERTIFIED	mg
	PLACARD NOTICE <input type="checkbox"/> POSTED <input type="checkbox"/> PHOTOS TAKEN	
	BOARD - UP ORDER ISSUED	
	OCCUPANCY PERMIT REQUIRED <input type="checkbox"/> REQUIRED <input type="checkbox"/> NOT REQUIRED (provide reasons)	
	FOLLOW - UP ORDERS <input type="checkbox"/> ISSUED SERIAL#	
1-15-13	Chris Ode @ Seaway bank - 343-3033 I called.	bc
	I received a call from <input type="checkbox"/> Owner <input type="checkbox"/> Agent <input type="checkbox"/> Operator	
	OR Phone No.	
1-15-13	I called Demetrius A Thompson 517-9589 In OP-	bc
1-15-13	I Spoke to: Demetrius A Thompson Phone No. 414-419-8800	bc
	If contact is not owner, explain:	
	I VERIFIED THE FOLLOWING INFORMATION	
	A) Owners name <input type="checkbox"/> YES <input type="checkbox"/> NO	
1-15-13	B) Phone number Contact made <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 414-419-8800	bc
	C) Mailing Address <input type="checkbox"/> YES <input type="checkbox"/> NO	
	If No, correct address is: 4615 W. Magalema Ln	bc
	Per Demetrius A Thomas LA Ueen, AZ 85339	-
	Copy mailed to new address <input type="checkbox"/> YES <input type="checkbox"/> NO	
	D) Receipt of orders <input type="checkbox"/> YES <input type="checkbox"/> NO	
1-15-13	E) Explained Placard Procedure <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	bc
	F) Explained Occupancy Permit Procedure <input type="checkbox"/> YES <input type="checkbox"/> NO	
1/16/12	Placard Fee Notification letter Mailed	SSV
1/29/16	@ 1:31 PM. Reinspection for placarded building program. Vacant board + secure. Photos	33 JJ