



APPLICATION FOR APPEAL

Saint Paul City Council – Legislative Hearings

RECEIVED
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CITY CLERK

310 City Hall, 15 W. Kellogg Blvd.
Saint Paul, Minnesota 55102
Telephone: (651) 266-8585
legislativehearings@ci.stpaul.mn.us

We need the following to process your appeal:

- ☒ \$25 filing fee (non-refundable) (payable to the City of Saint Paul) (if cash: receipt number 885543)
 - ☒ Copy of the City-issued orders/letter being appealed & any attachments you may wish to include
 - ☒ Walk In ☐ Mail ☐ Email
- Appeal taken by:

HEARING DATE & TIME

(provided by Legislative Hearing staff)

Tuesday, July 23, 2024

Location of Hearing:

☒ Telephone: you will be called between 3:00pm & 5:00pm

☐ In person (Room 330 City Hall) at: _____
(required for all condemnation orders and
Fire C of O revocations and orders to vacate)

Address Being Appealed:

Number & Street: 1054 Cumberland ST. City: St. Paul State: MN Zip: 55117

Appellant/Applicant: Phyllis Fisher Email: pef941@gmail.com

Phone Numbers: Business _____ Residence _____ Cell 201-459-9854

Signature: Phyllis Fisher Date: 7/15/2024

Name of Owner (if other than Appellant): Leah Robey

Mailing Address if Not Appellant's: 1054 Cumberland ST. St. Paul MN 55117

Phone Numbers: Business _____ Residence _____ Cell 651.769.7210

What is being appealed and why? Attachments Are Acceptable

- ☐ Vacate Order/Condemnation/Revocation of Fire C of O
- ☐ Summary/Vehicle Abatement
- ☐ Fire C of O Deficiency List/Correction
- ☐ Code Enforcement Correction Notice
- ☐ Vacant Building Registration
- ☒ Other (Fence Variance, Code Compliance, etc.) Fence Variance

24-054671

CITY OF ST. PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
ST. PAUL, MINNESOTA 55101-1806

REQUEST FOR FENCE VARIANCE
\$85.00

Visit our Web Site at www.stpaul.gov/dsi

ADDRESS OF VARIANCE: 1054 Cumberland St. St Paul 55117			Effective: 02/25/2023
OWNER ADDRESS: 1054 Cumberland St. St Paul 55117			
CONTRACTOR ADDRESS: 8500 Xylon Ave. N			
CITY: Brooklyn Park	STATE: MN	ZIP: 55445	
PHONE: 763.425.5050	FAX: 763.425.9006	EMAIL: dave@tcfence.com	

FENCE DETAILS REQUIRED (A site plan indicating the location of the fence must be provided with this application)		
Proposed length of fence (total linear feet) Length of Fence: 100	Proposed height of fence Feet: 6 1/2 Inches: 8 0	Will the fence be erected on a corner lot? ☒ Yes ☐ No
Type of Fence: ☐ Non-Obscuring Fence ☒ Privacy Fence ☐ Barbed Wire Fence		
Fence Location: ☐ Perimeter of Entire Yard ☐ Front Yard Only ☒ FRONT AND SIDE YARD		
Sec. 33.07, Fences--Requirements. Variances. A variance of the fence height regulations may be granted if, after investigation by the building official, it is found that site, or terrain, or nuisance animal conditions warrant a waiver of the height restrictions.		

The property on which the fence is proposed satisfies the variance criteria (underlined in preceding box) for the following reason(s):
Check at least one item below and state the reason(s) you believe the property qualifies for variance consideration

☒ SITE CONDITIONS ☐ TERRAIN CONDITIONS ☐ NUISANCE ANIMAL CONDITIONS

REASON FOR VARIANCE REQUEST: Fence will extend into front lot by 11 feet. It will be 10 feet from front sidewalk and 23 feet in from front street curb (Cumberland St). The side will be 23 feet in from Cook St. The stop sign on Cumberland is 6 ft back from the sidewalk and 19 feet from the Cook St. Curb. The corner will be diagonally back 30 feet from the intersection of the two streets, not counting the drainage area at the side of the streets.

Office Use Only Below This Line

INSPECTORS OBSERVATIONS:

INSPECTORS NAME: _____ Phone: 651 - _____

APPROVED Date: 7-11-24 Building Official: Steve Will Phone: 651 - 266- 9021

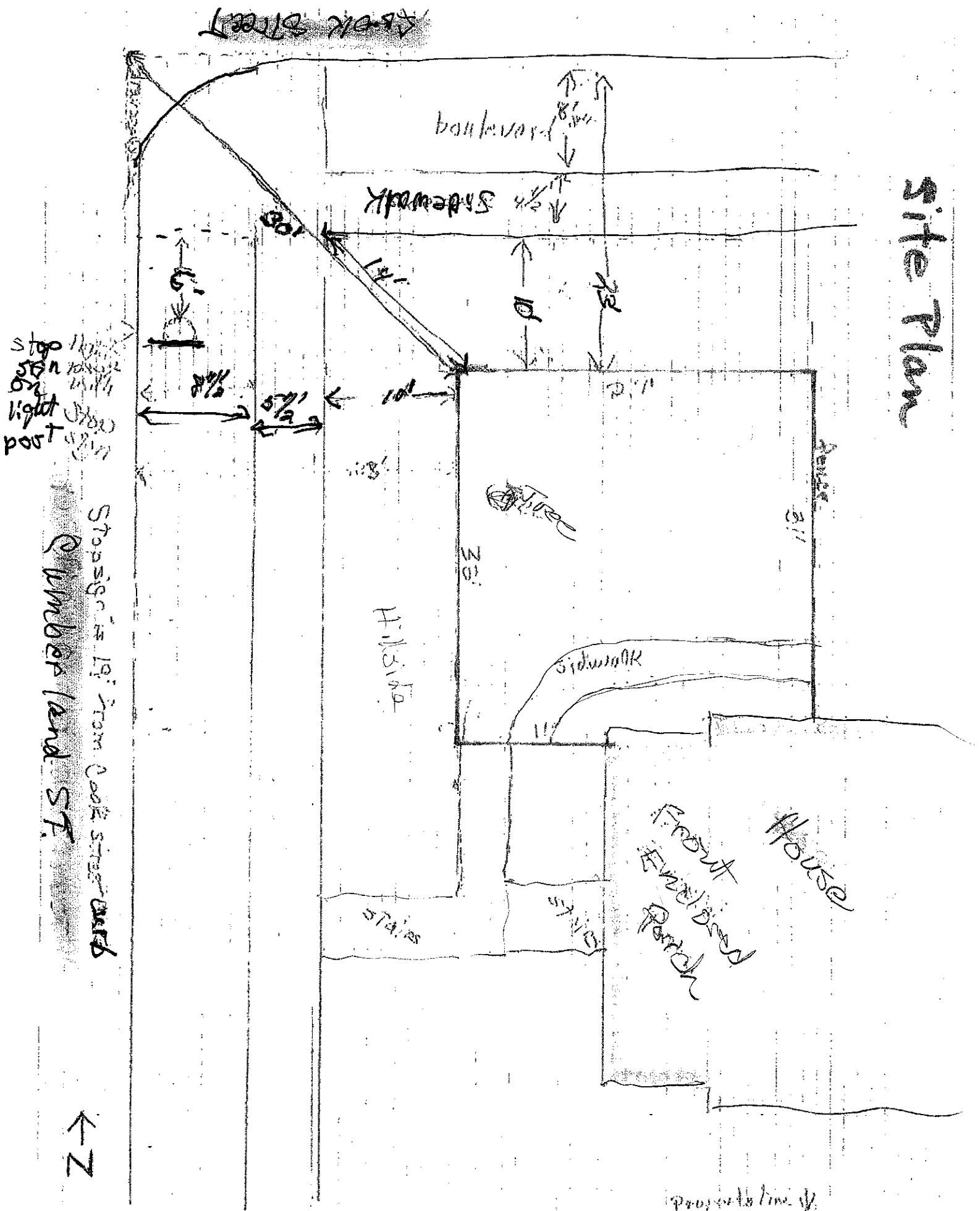
☒ DENIED (This decision may be appealed to the legislative hearing officer by calling 651-266-8560.)

RETURN SIGNED RECOMMENDATION TO: _____ AT THE FRONT COUNTER.

Effective April 3, 2021, a 2.49% service fee will be charged for all credit or debit card transactions and will appear as a separate transaction on your card statement. This fee is charged by the service provider the Department of Safety and Inspections uses to handle credit card transactions. The City will not receive any of the service fees.

Signature of Cardholder (required for all charges): _____											
☐ AMEX ☐ Discover ☐ MasterCard ☐ Visa				Security Code ▶		Expiration Date: Month / Year ▶					
BILLING ZIP CODE: _____											
Enter Account Number ▶											

Site Plan



projected line ψ .

