

Construction Board of Appeals

Regular Meeting Agenda

Wednesday, April 28, 2010
4:00 p.m., Council Chambers



City of South Haven

1. Call to Order
2. Roll Call
3. Approval of Agenda
4. Approval of Minutes – June 17, 2009 and March 24, 2010
5. Interested Citizens in the Audience Will be Heard on Items Not on the Agenda

OLD BUSINESS

The following agenda item was heard by the Hearing Officer on February 24th, at which time the Hearing Officer issued an order which was subject to appeal to the Constructing Board of Appeals pursuant to the Dangerous Building Ordinance provisions that each property owner has the right to appeal the Hearing Officer's Order, requesting that it not be enforced by the City or modified in extent or time limit. Said property owner is only required to attend the Construction Board of Appeals meeting if they want to appeal the Hearing Officer's Order.

6. **829 Phillips** – The property owner attended the March 24th, 2010 CBA meeting and the case was continued for 30 days to allow the owner to prepare a response to the Hearing Officer's order to be heard on April 28th, 2010.

7. Adjourn

RESPECTFULLY SUBMITTED,
William K. Spaeth, AICP
Planner / Zoning Administrator

South Haven City Hall is barrier free and the City of South Haven will provide the necessary reasonable auxiliary aids and services for persons with disabilities, such as signers for the hearing impaired and audio tapes of printed materials being considered at the meeting to individuals with disabilities at the meeting upon seven (7) days notice to the South Haven City Hall.

Construction Board of Appeals

Regular Meeting Minutes

Wednesday, June 17, 2009
4:00 p.m., Council Chambers



City of South Haven

1. **The meeting was called to order by Lewis at 4:10 p.m.**
2. **Roll Call**
Present: Dopp, Lundgren, Lewis
Absent: Dubuisson
3. **Approval of Agenda**
Motion by Dopp, second by Lundgren to approve the agenda. All in favor. Motion carries.
4. **Approval of Minutes - December 18, 2008**
Motion by Dopp, second by Lundgren to approve the December 18, 2008 minutes. All in favor. Motion carries.
5. **Interested Citizens in the Audience Will be Heard on Items Not on the Agenda**
There were none.

NEW BUSINESS

6. **639 Phillips Street – Hearing Officer’s Order for demolition.**
Lewis noted that the board had waited for ten minutes in case the owner planned to appear. Spaeth gave an overview of the process to date, stating that certified and regular mailings regarding the meeting had been mailed to the owner, and a signed return receipt had been received by the city. He noted that the hearing officer’s order was to proceed with demolition and the owner had affirmed that decision, agreeing that the house was in very bad shape. Kids have been entering the house, and the city has received complaints from neighbors of the house being rodent infested. Also, there is water in the basement, which creates a potential danger. Spaeth noted that the city got a bid from a contractor for in excess of \$84,000 for repairs. The assessor’s sheet on this property showed a 2008 assessed value of \$66,700, meaning this house meets the requirements for demolition. There was discussion of the formula used for determining whether a house meets the requirement, noting that the ordinance should be followed exactly. There was discussion of removing the land value from the equation. Lundgren pointed out that if there is a 3 to 1 ratio, it would be very easy to decide, but if the spread was only a few thousand dollars it might be possible to nit-pick the bid and difficult to make a decision. It was noted that there needs to be a legal interpretation of the ordinance for future determinations.

There were questions of whether the cost of demolition will be borne by the property owner. Spaeth explained the process requires the city to bear the initial cost of demolition, which then becomes a lien on the property. Spaeth noted that the legal process of demolition will take another two to three months, requesting that the board consider including the immediate boarding up of the property as part of any motion. It was pointed out that once a motion is made, the property owner is given a twenty-one day grace period until Spaeth turns it over to legal counsel, who in turn gets the court to affirm the decision.

Motion by Lundgren, second by Dopp that the house at 639 Phillips Street be immediately boarded up by the city for public safety with all costs borne by the property owner. If all safety conditions are not met within twenty-one days, the house is to be demolished. All in favor. Motion carries.

6a. Abandoned structures

Ross Rogien, Building Inspector, asked the board what action could be taken regarding abandoned structures, such as a building behind Menard's, which is partially built, and has been standing with OSB and no Tyvek wrap for quite some time. There was discussion regarding an old church with multiple colors of roof shingles and trim boards falling half off. There was discussion of the International Property Maintenance Code being a small document and an easy read that has more "teeth" for a municipality to deal with such situations.

Motion by Dopp, second by Lundgren to request that city council adopt the International Property Maintenance Code. All in favor. Motion carries.

7. Adjourn

Motion by Lundgren, second by Dopp to adjourn at 4:32 p.m. All in favor. Motion carries.

RESPECTFULLY SUBMITTED,

Marsha Ransom
Recording Secretary

Construction Board of Appeals

Regular Meeting Minutes

Wednesday, March 24, 2010

4:00 p.m., Council Chambers



City of South Haven

1. The Meeting was Called to Order by Lewis at 4:05 p.m.

2. Roll Call

Present: Stegeman, Lewis

Absent: Lundgren

Bill Spaeth was present representing the Building Services Department of the City.

Spaeth explained that notices were sent for a hearing by a Hearing Officer which was held a month ago. The Hearing Officer heard each person that showed up, and made an order on all five cases. Mr. John Davis, the 829 Phillips representative, did not receive a notice because the transfer of the property wasn't done until after the Hearing Officer meeting. After the hearing with the Hearing Officer, property owners were given 30 days to appeal the Hearing Officer's order. In the notification letters, property owners are informed that if they wish to appeal the order of the Hearing Officer, held on February 24, 2010, they needed to come to this meeting of the Construction Board of Appeals.

Spaeth noted that Mr. Davis is the only one here, representing 829 Phillips; the other four have not shown up. In regards to this particular case, Spaeth stated that Mark Manning, the City's legal counsel, recommend that Mr. Davis be given another 30 days to prepare a response. Since the hearing officer is not here we would need to continue this case to a meeting to be held on April 28, 2010, at 4pm.

Spaeth pointed out that after the agenda and information packet was sent out, a cost estimate for repairs was prepared for the City and plugged into the SEV of the subject property (structure and building at 539 Phillips). That determination tells the board whether or not they can order a demolition under sixty (60) days or if the board must maintain the sixty (60) days time period. Spaeth will provide this estimate to Mr. Davis today so he can prepare his presentation for the next meeting.

Spaeth noted that the other four orders stand because the people didn't show up.

Lewis stated that the meeting will be postponed until April 28, 2010.

3. Adjourn

Motion by Stegeman, second by Lewis, to adjourn at 4:15 p.m. All in favor. Motion carried.

RESPECTFULLY SUBMITTED,

Marsha Ransom

Recording Secretary



Agenda Item # 6

829 Phillips

Background Information: The structure subject to this order is a legal non-conforming structure being the second primary structure on the subject property which is zoned for single family detached housing as R-1B. The major structure on the property is being used as a multi-family apartment building. The subject structure experienced a fire late last year within which there was a death. As the structure suffered extensive damage and is a non-conforming structure, it is being pursued for demolition.

Mr. Davis (the apparent owner of the property) has asked that he be given additional time to respond to the Hearing Officer's Order because he was not notified directly about the Hearing or the determination by the Building Inspector. He has indicated that he was prevented from entering the property due to the death that occurred, and he immediately boarded the property up to prevent access. He wants to be allowed time to determine if he can save the structure.

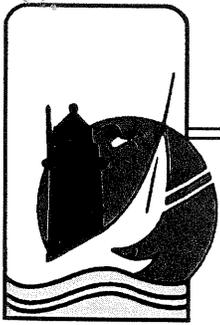
The notifications are required to go to the owner of record which was a Mr. Bowers until some point in February when a deed of transfer was apparently filed. Evidently, Mr. Davis had purchased the property via contract some time ago, and the transfer of deed had never been filed previously. The notice that the Building Inspector sent in January and the notice for the Hearing Officer's meeting sent in early February preceded the filing of the transfer deed. The City included Mr. Davis with the notification of his right to appeal the Hearing Officer's Order to the Construction Board of Appeals as it was sent at the end of February after the filing of the transfer deed.

Hearing Officer's Order: That the structure on the subject property be demolished pursuant to the City's demolition specifications by March 23, 2010.

Support Material:

- 1) Notice of right to appeal Hearing Officer's Order with said order attached.
- 2) Previous Correspondence
- 3) Fire Report
- 4) Photos
- 5) Cost of repairs estimate
- 6) SEV comparison
- 7) Quit Claim Deed Recorded 2-11-2010

RESPECTFULLY SUBMITTED,
William K. Spaeth, AICP
Planner / Zoning Administrator



City of South Haven

City Hall • 539 Phoenix Street • South Haven, Michigan 49090-1499

Telephone (269) 637-0700 • FAX (269) 637-5319

JOHN DAVIS
P.O. BOX 523
SOUTH HAVEN, MI 49090

02/26/2010

Regarding: DANGEROUS BUILDING HEARING DETERMINATION

To Whom it may concern;

The City of South Haven's Building Inspector has found that the structure on the Subject Property identified below is dangerous and needs to be corrected as identified under "Infraction" below. You are hereby notified that the hearing before South Haven's Hearing Officer was conducted and the determination from said hearing is attached. You are hereby informed that should you not agree to comply with said determination within the deadline provided therein, you may appeal said determination to the Construction Board of Appeals (CBA) meeting date identified below, which is no later than 30 days after the Hearing Officer's hearing date. In the event you wish to appeal the Hearing Officer's determination, you are hereby instructed to present yourself to the CBA for your opportunity to show cause why the Hearing Officer's determination should not be complied with for the structure to be demolished, or otherwise made safe and maintained properly. **There shall be no further notifications from the City prior to the compliance date.**

Subject Property: 829 PHILLIPS ST,SOUTH HAVEN

Tax Parcel Number: 80-53-580-026-01

Infraction: DANGEROUS BUILDING (FIRE DAMAGE)

Construction Board of Appeals meeting date: March 24th, 2010 at 4pm at City Hall

The City of South Haven asks that you please be aware of the condition of your property at all times, and that you make proper arrangements for the maintenance of it. Therefore, it is incumbent upon you to correct the infraction and contact the building official to avoid any fines. The quality of life within all of our neighborhoods depends on the cooperation of every property owner, whether residential or commercial. We thank you in advance for your cooperation in correcting this infraction.

Respectfully,

A handwritten signature in black ink, appearing to read "Ross Rogien", is placed below the word "Respectfully,".

Ross Rogien, Building Inspector
Building Services Department (269) 637-0789



City of South Haven

City Hall • 539 Phoenix Street • South Haven, Michigan 49090-1499

Telephone (269) 637-0700 • FAX (269) 637-5319

BOWERS JOSEPH
2246 FARRINGTON AVE
ALEXANDRIA, VA 22303-1551

02/26/2010

Regarding: DANGEROUS BUILDING HEARING DETERMINATION

To Whom it may concern;

The City of South Haven's Building Inspector has found that the structure on the Subject Property identified below is dangerous and needs to be corrected as identified under "Infraction" below. You are hereby notified that the hearing before South Haven's Hearing Officer was conducted and the determination from said hearing is attached. You are hereby informed that should you not agree to comply with said determination within the deadline provided therein, you may appeal said determination to the Construction Board of Appeals (CBA) meeting date identified below, which is no later than 30 days after the Hearing Officer's hearing date. In the event you wish to appeal the Hearing Officer's determination, you are hereby instructed to present yourself to the CBA for your opportunity to show cause why the Hearing Officer's determination should not be complied with for the structure to be demolished, or otherwise made safe and maintained properly. **There shall be no further notifications from the City prior to the compliance date.**

Subject Property: 829 PHILLIPS ST,SOUTH HAVEN

Tax Parcel Number: 80-53-580-026-01

Infraction: DANGEROUS BUILDING (FIRE DAMAGE)

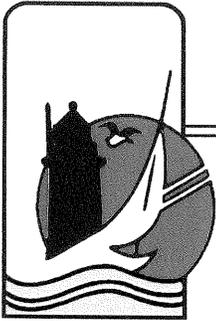
Construction Board of Appeals meeting date: March 24, 2010 at 4pm at City Hall

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Respectfully,

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Ross Rogien, Building Inspector
Building Services Department (269) 637-0789



City of South Haven

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Telephone (269) 637-0700 • FAX (269) 637-5319

DANGEROUS BUILDING ORDINANCE HEARING OFFICER DECISION & ORDER

Hearing Date: FEB 24, '10 Subject Property: 829 PHILLIPS

Owner or Owner's Representative Present: NO SHOW

Owner / Representative Address: N/A

Phone: N/A E-mail: N/A

FINDINGS - The Owner / Representative agrees (yes) or disagrees (no) to the following: YES NO

That he/she received notice of the hearing YES NO

That he/she understands the purpose of this hearing YES NO

That the subject property is in violation of one or more City Codes YES NO

That the subject property dose not have an operable kitchen YES NO

That the subject property dose not have an operable bathroom YES NO

That the subject property dose not have a fully functioning electrical system YES NO

That the subject property dose not have a fully functioning mechanical system YES NO

That dangerous conditions exist on the subject property YES NO

Decision & Order: The below signed Hearing Officer does hereby order the owner of the subject property...

To repair the structure at the subject property so that it meets the 2006 Michigan Building Code.

To demolish the structure at the subject property pursuant to the City's Demolition Specifications.

To repair or demolish the structure at the subject property pursuant to the above referenced codes.

To _____

This order is to be completed by the date stated below or the City shall subsequently forward this case to the Construction Board of Appeals with an **order for demolition of the subject property.**

By: Craig Niephaus
Craig Niephaus, City of South Haven Hearing Officer

Above Order to be completed by: 3/23/10
Date



City of South Haven

City Hall • 539 Phoenix Street • South Haven, Michigan 49090-1499

Telephone (269) 637-0700 • FAX (269) 637-5319

BOWERS JOSEPH
2246 FARRINGTON AVE
ALEXANDRIA, VA 22303-1551

02/05/2010

Regarding: DANGEROUS BUILDING HEARING NOTIFICATION

To Whom it may concern;

The City of South Haven's Building Inspector has found that the structure on the Subject Property identified below is dangerous and needs to be corrected as identified under "Infraction" below. You are hereby notified of the hearing date before South Haven's Hearing Officer in the Building Services Department offices. You are instructed to present yourself at said hearing to be given your opportunity to show cause why the Hearing Officer should not order the structure demolished, or otherwise made safe and maintained properly. **There shall be no further notifications from the City prior to the hearing date.**

Subject Property: 829 PHILLIPS ST, SOUTH HAVEN
Tax Parcel Number: 80-53-580-026-01

Infraction: DANGEROUS BUILDING (FIRE DAMAGE)
PRIOR NOTICE HAS FAILED TO BRING THIS PROPERTY INTO CONFORMANCE

Hearing Date: Wednesday February 24th, 2010 at 4pm at City Hall 539 Phoenix Street

The City of South Haven asks that you please be aware of the condition of your property at all times, and that you make proper arrangements for the maintenance of it. Therefore, it is incumbent upon you to correct the infraction and contact the building official to avoid any fines. The quality of life within all of our neighborhoods depends on the cooperation of every property owner, whether residential or commercial. We thank you in advance for your cooperation in correcting this infraction.

Respectfully,

A handwritten signature in black ink, appearing to read "W.K. Spaeth", is written over the word "Respectfully,".

William K. Spaeth
Zoning Administrator, Building Services Department (269) 637-0763



01/11/2010

BOWERS JOSEPH
2246 FARRINGTON AVE
ALEXANDRIA, VA 22303-1551

Regarding: Courtesy notification

Dear Property Owner;

Please be aware that the below stated condition has been observed at your property identified below as the subject property. The quality of life within all of our neighborhoods depends on the cooperation of every property owner. The City of South Haven asks that you please be aware of the condition of your property at all times, and that you make proper arrangements for the maintenance of it. City property records indicate that you, as the property owner of record, are the responsible party for the subject property, and therefore we ask that you please take the necessary steps to correct the condition as soon as possible.

Subject Property: 829 PHILLIPS ST,SOUTH HAVEN
Tax Parcel Number: 80-53-580-026-01

Property Condition: DANGEROUS BUILDING (FIRE DAMAGE)

Please contact the building department regarding the status of the damaged structure. Upon on site inspection this structure is deemed to be un-repairable and should be completely torn down and removed from site (including the foundation system). Please make effort to remove this structure by January 29, 2010.

We apologize if this letter has arrived after you have already taken care of this condition. The visual inspection of the neighborhood took place on the date of the letter, and it may have taken a day or so to arrive in your mailbox.

Thank you for your cooperation in keeping South Haven's neighborhoods a positive experience for all of our residents.

Respectfully,

ROSS ROGIEN
Building Inspector- Building Services Department (269) 637-0763

A FDID 08013 * State MI * Incident Date 12 30 2009 Station 3 Incident Number 0001702 Exposure 000 * Delete Change No Activity NFIRS -1 Basic

B Location* Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B "Alternative Location Specification". Use only for Wildland fires. Census Tract -

Street address 829 Phillips ST
 Number/Milepost Prefix Street or Highway Street Type Suffix

Intersection 20 South Haven MI 49090 -
 Apt./Suite/Room City State Zip Code

In front of Rear of Adjacent to Directions
 Cross street or directions, as applicable

C Incident Type *
111 Building fire
 Incident Type

E1 Date & Times Midnight is 0000
 Check boxes if dates are the same as Alarm Date. ALARM always required
 Alarm * 12 30 2009 04:10:00
 ARRIVAL required, unless canceled or did not arrive
 Arrival * 12 30 2009 04:14:01
 CONTROLLED Optional, except for wildland fires
 Controlled * 12 30 2009 04:24:00
 LAST UNIT CLEARED, required except for wildland fires
 Last Unit Cleared 12 30 2009 09:30:00

E2 Shift & Alarms Local Option
B 01 01
 Shift or Alarms District Platoon

D Aid Given or Received*
 1 Mutual aid received
 2 Automatic aid recv.
 3 Mutual aid given
 4 Automatic aid given
 5 Other aid given
 N None
 Their FDID Their State Their Incident Number

E3 Special Studies Local Option
 Special Study ID# Special Study Value

F Actions Taken *
11 Extinguishment by fire
 Primary Action Taken (1)
12 Salvage & overhaul
 Additional Action Taken (2)
24 Recover body
 Additional Action Taken (3)

G1 Resources *
 Check this box and skip this section if an Apparatus or Personnel form is used.
 Apparatus Personnel
 Suppression 0011 0023
 EMS
 Other
 Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values
 LOSSES: Required for all fires if known. Optional for non fires. None
 Property \$, 035 , 000
 Contents \$, 003 , 000
 PRE-INCIDENT VALUE: Optional
 Property \$, 035 , 000
 Contents \$, 003 , 000

Completed Modules
 Fire-2
 Structure-3
 Civil Fire Cas.-4
 Fire Serv. Cas.-5
 EMS-6
 HazMat-7
 Wildland Fire-8
 Apparatus-9
 Personnel-10
 Arson-11

H1* Casualties None
 Deaths Injuries
 Fire Service
 Civilian 001
H2 Detector Required for Confined Fires.
 1 Detector alerted occupants
 2 Detector did not alert them
 U Unknown

H3 Hazardous Materials Release
 N None
 1 Natural Gas: slow leak, no evacuation or HazMat actions
 2 Propane gas: <21 lb. tank (as in home BBQ grill)
 3 Gasoline: vehicle fuel tank or portable container
 4 Kerosene: fuel burning equipment or portable storage
 5 Diesel fuel/fuel oil: vehicle fuel tank or portable
 6 Household solvents: home/office spill, cleanup only
 7 Motor oil: from engine or portable container
 8 Paint: from paint cans totaling < 55 gallons
 0 Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form

I Mixed Use Property
 NN Not Mixed
 10 Assembly use
 20 Education use
 33 Medical use
 40 Residential use
 51 Row of stores
 53 Enclosed mall
 58 Bus. & Residential
 59 Office use
 60 Industrial use
 63 Military use
 65 Farm use
 00 Other mixed use

J Property Use* Structures

131 <input type="checkbox"/> Church, place of worship	341 <input type="checkbox"/> Clinic, clinic type infirmary	539 <input type="checkbox"/> Household goods, sales, repairs
161 <input type="checkbox"/> Restaurant or cafeteria	342 <input type="checkbox"/> Doctor/dentist office	579 <input type="checkbox"/> Motor vehicle/boat sales/repair
162 <input type="checkbox"/> Bar/Tavern or nightclub	361 <input type="checkbox"/> Prison or jail, not juvenile	571 <input type="checkbox"/> Gas or service station
213 <input type="checkbox"/> Elementary school or kindergarten	419 <input checked="" type="checkbox"/> 1-or 2-family dwelling	599 <input type="checkbox"/> Business office
215 <input type="checkbox"/> High school or junior high	429 <input type="checkbox"/> Multi-family dwelling	615 <input type="checkbox"/> Electric generating plant
241 <input type="checkbox"/> College, adult education	439 <input type="checkbox"/> Rooming/boarded house	629 <input type="checkbox"/> Laboratory/science lab
311 <input type="checkbox"/> Care facility for the aged	449 <input type="checkbox"/> Commercial hotel or motel	700 <input type="checkbox"/> Manufacturing plant
331 <input type="checkbox"/> Hospital	459 <input type="checkbox"/> Residential, board and care	819 <input type="checkbox"/> Livestock/poultry storage (barn)
	464 <input type="checkbox"/> Dormitory/barracks	882 <input type="checkbox"/> Non-residential parking garage
	519 <input type="checkbox"/> Food and beverage sales	891 <input type="checkbox"/> Warehouse
Outside	936 <input type="checkbox"/> Vacant lot	981 <input type="checkbox"/> Construction site
124 <input type="checkbox"/> Playground or park	938 <input type="checkbox"/> Graded/care for plot of land	984 <input type="checkbox"/> Industrial plant yard
655 <input type="checkbox"/> Crops or orchard	946 <input type="checkbox"/> Lake, river, stream	
669 <input type="checkbox"/> Forest (timberland)	951 <input type="checkbox"/> Railroad right of way	Lookup and enter a Property Use code only if you have NOT checked a Property Use box: Property Use <u>419</u>
807 <input type="checkbox"/> Outdoor storage area	960 <input type="checkbox"/> Other street	<u>1 or 2 family dwelling</u>
919 <input type="checkbox"/> Dump or sanitary landfill	961 <input type="checkbox"/> Highway/divided highway	
931 <input type="checkbox"/> Open land or field	962 <input type="checkbox"/> Residential street/driveway	

08013
FDID *

MI
State *

MM DD
12 30
Incident Date

YYYY
2009

3
Station

0001702
Incident Number *

000
Exposure *

Complete
Narrative

Narrative:

Dispatched for a possible structure fire., Police units on scene within minutes stated home is fully engulfed with fire and a possible person still inside. Prior to units arrival on scene, mutual aid was requested from Covert Fire dept for manpower and tanker from Bangor Fire Dept, FF Bierhalter on scene and cancelled mutual aid from responding, mutual aid to hold at there stations. Fire fighter Florey and Bemis attempted to gain entry inside of home and was driven back out due to high heat and flames, Fire had to be knocked down from South side entry way with 1 3/4 line. Fire knocked down, entry made and searched, victim was found just inside the south entrance door by FF Florey. Body was very difficult to move due to the burns on the body. FF Florey moved the body to the front door and Paramedic Wise and Owen Ridley observed the severity of the burns to the body and determined that nothing further could be done for the victim. Victim was declared decease inside the home, FF continued to extinguish remaining fire. South Haven Medical Control was contacted by Paramedic Owen Ridley. Victim was covered with a blanket in the home, Michigan State Police Fire Marshal Scott Leroy called to the scene for investigation. Michigan Gas and South Haven Electric called to scene for utilities. Fire investigation: cause of the fire is being attributed to combustibles too close to space heater and no working smoke detector in the home. Building is Owned by John Davis 829 Phillip apt#1. There is no insurance on the building.

Initial 9-1-1 call was received from Vera James of apartment 8, she stated she saw smoke coming from the north side of the roof of apartment 20, she tried to call the victim on his phone and got not answer, she then called 9-1-1. Vera James last spoke to the victim yesterday around 5pm. Vera James stated the victim had taken his smoke detector down due to his cigarette smoke kept making it go off.

B Property Details

B1 0001 Not Residential
 Estimated Number of residential living units in building of origin whether or not all units became involved

B2 001 Buildings not involved
 Number of buildings involved

B3 None
 Acres burned (outside fires) Less than one acre

C On-Site Materials None or Products Complete if there were any significant amounts of commercial, industrial, energy or agricultural products or materials on the Property, whether or not they became involved

Enter up to three codes. Check one or more boxes for each code entered.

On-site material (1)

On-site material (2)

On-site material (3)

1 Bulk storage or warehousing
 2 Processing or manufacturing
 3 Packaged goods for sale
 4 Repair or service

D Ignition

D1 14 Common room, den,
 Area of fire origin *

D2 00 Heat source: other
 Heat source *

D3 92 Magazine, newspaper,
 Item first ignited * Check Box if fire spread was confined to object of origin

D4
 Type of material first ignited Required only if item first ignited code is 00 or <70

E1 Cause of Ignition

Check box if this is an exposure report. Skip to section G

1 Intentional
 2 Unintentional
 3 Failure of equipment or heat source
 4 Act of nature
 5 Cause under investigation
 U Cause undetermined after investigation

E2 Factors Contributing To Ignition

12 Heat source too None
 Factor Contributing To Ignition (1)

 Factor Contributing To Ignition (2)

E3 Human Factors Contributing To Ignition

Check all applicable boxes

1 Asleep None
 2 Possibly impaired by alcohol or drugs
 3 Unattended person
 4 Possibly mental disabled
 5 Physically Disabled
 6 Multiple persons involved
 7 Age was a factor
 Estimated age of person involved
 1 Male 2 Female

F1 Equipment Involved In Ignition

None If Equipment was not involved, Skip to Section G

 Equipment Involved

Brand

Model

Serial #

Year

F2 Equipment Power

 Equipment Power Source

F3 Equipment Portability

1 Portable
 2 Stationary

Portable equipment normally can be moved by one person, is designed to be use in multiple locations, and requires no tools to install.

G Fire Suppression Factors

Enter up to three codes. None

 Fire suppression factor (1)

 Fire suppression factor (2)

 Fire suppression factor (3)

H1 Mobile Property Involved

None

1 Not involved in ignition, but burned
 2 Involved in ignition, but did not burn
 3 Involved in ignition and burned

H2 Mobile Property Type & Make

 Mobile property type

 Mobile property make

Local Use

Pre-Fire Plan Available
Some of the information presented in this report may be based upon reports from other Agencies

Arson report attached
 Police report attached
 Coroner report attached
 Other reports attached

 Mobile property model Year

 License Plate Number State VIN Number

I1 Structure Type * If Fire was in enclosed building or a portable/mobile structure complete the rest of this form 1 <input checked="" type="checkbox"/> Enclosed Building 2 <input type="checkbox"/> Portable/mobile structure 3 <input type="checkbox"/> Open structure 4 <input type="checkbox"/> Air supported structure 5 <input type="checkbox"/> Tent 6 <input type="checkbox"/> Open platform (e.g. piers) 7 <input type="checkbox"/> Underground structure (work areas) 8 <input type="checkbox"/> Connective structure (e.g. fences) 0 <input type="checkbox"/> Other type of structure	I2 Building Status * 1 <input type="checkbox"/> Under construction 2 <input checked="" type="checkbox"/> Occupied & operating 3 <input type="checkbox"/> Idle, not routinely used 4 <input type="checkbox"/> Under major renovation 5 <input type="checkbox"/> Vacant and secured 6 <input type="checkbox"/> Vacant and unsecured 7 <input type="checkbox"/> Being demolished 0 <input type="checkbox"/> Other U <input type="checkbox"/> Undetermined	I3 Building * Height Count the ROOF as part of the highest story <u>001</u> Total number of stories at or above grade <u>001</u> Total number of stories below grade	I4 Main Floor Size* NFIRS-3 Structure Fire _____ , _____ , <u>800</u> Total square feet OR <u>_____</u> , <u>040</u> BY <u>_____</u> , <u>020</u> Length in feet Width in feet
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J1 Fire Origin * <u>001</u> <input type="checkbox"/> Below Grade Story of fire origin	J3 Number of Stories Damaged By Flame Count the ROOF as part of the highest story _____ Number of stories w/ minor damage (1 to 24% flame damage) _____ Number of stories w/ significant damage (25 to 49% flame damage) <u>001</u> Number of stories w/ heavy damage (50 to 74% flame damage) _____ Number of stories w/ extreme damage (75 to 100% flame damage)	K Material Contributing Most To Flame Spread <input type="checkbox"/> Check if no flame spread OR same as material first ignited OR unable to determine Skip To Section L K1 _____ Item contributing most to flame spread K2 _____ Type of material contributing most of flame spread Required only if item contributing code is 00 or <70
J2 Fire Spread * 1 <input type="checkbox"/> Confined to object of origin 2 <input type="checkbox"/> Confined to room of origin 3 <input checked="" type="checkbox"/> Confined to floor of origin 4 <input type="checkbox"/> Confined to building of origin 5 <input type="checkbox"/> Beyond building of origin		

L1 Presence of Detectors * (In area of the fire) N <input type="checkbox"/> None Present Skip to section M 1 <input checked="" type="checkbox"/> Present U <input type="checkbox"/> Undetermined	L3 Detector Power Supply 1 <input checked="" type="checkbox"/> Battery only 2 <input type="checkbox"/> Hardwire only 3 <input type="checkbox"/> Plug in 4 <input type="checkbox"/> Hardwire with battery 5 <input type="checkbox"/> Plug in with battery 6 <input type="checkbox"/> Mechanical 7 <input type="checkbox"/> Multiple detectors & power supplies 0 <input type="checkbox"/> Other _____ U <input type="checkbox"/> Undetermined	L5 Detector Effectiveness Required if detector operated 1 <input type="checkbox"/> Alerted Occupants, occupants responded 2 <input type="checkbox"/> Occupants failed to respond 3 <input type="checkbox"/> There were no occupants 4 <input type="checkbox"/> Failed to alert occupants U <input type="checkbox"/> Undetermined
L2 Detector Type 1 <input checked="" type="checkbox"/> Smoke 2 <input type="checkbox"/> Heat 3 <input type="checkbox"/> Combination smoke - heat 4 <input type="checkbox"/> Sprinkler, water flow detection 5 <input type="checkbox"/> More than 1 type present 0 <input type="checkbox"/> Other _____ U <input type="checkbox"/> Undetermined	L4 Detector Operation 1 <input type="checkbox"/> Fire too small to activate 2 <input type="checkbox"/> Operated (Complete Section L5) 3 <input checked="" type="checkbox"/> Failed to Operate (Complete Section L6) U <input type="checkbox"/> Undetermined	L6 Detector Failure Reason Required if detector failed to operate 1 <input type="checkbox"/> Power failure, shutoff or disconnect 2 <input type="checkbox"/> Improper installation or placement 3 <input type="checkbox"/> Defective 4 <input type="checkbox"/> Lack of maintenance, includes cleaning 5 <input checked="" type="checkbox"/> Battery missing or disconnected 6 <input type="checkbox"/> Battery discharged or dead 0 <input type="checkbox"/> Other _____ U <input type="checkbox"/> Undetermined

M1 Presence of Automatic Extinguishment System * N <input checked="" type="checkbox"/> None Present 1 <input type="checkbox"/> Present Complete rest of Section M	M3 Automatic Extinguishment System Operation Required if fire was within designed range 1 <input type="checkbox"/> Operated & effective (Go to M4) 2 <input type="checkbox"/> Operated & not effective (M4) 3 <input type="checkbox"/> Fire too small to activate 4 <input type="checkbox"/> Failed to operate (Go to M5) 0 <input type="checkbox"/> Other U <input type="checkbox"/> Undetermined	M5 Automatic Extinguishment System Failure Reason Required if system failed 1 <input type="checkbox"/> System shut off 2 <input type="checkbox"/> Not enough agent discharged 3 <input type="checkbox"/> Agent discharged but did not reach fire 4 <input type="checkbox"/> Wrong type of system 5 <input type="checkbox"/> Fire not in area protected 6 <input type="checkbox"/> System components damaged 7 <input type="checkbox"/> Lack of maintenance 8 <input type="checkbox"/> Manual Intervention 0 <input type="checkbox"/> Other _____ U <input type="checkbox"/> Undetermined
M2 Type of Automatic Extinguishment System * Required if fire was within designed range of AES 1 <input type="checkbox"/> Wet pipe sprinkler 2 <input type="checkbox"/> Dry pipe sprinkler 3 <input type="checkbox"/> Other sprinkler system 4 <input type="checkbox"/> Dry chemical system 5 <input type="checkbox"/> Foam system 6 <input type="checkbox"/> Halogen type system 7 <input type="checkbox"/> Carbon dioxide (CO ₂) system 0 <input type="checkbox"/> Other special hazard system U <input type="checkbox"/> Undetermined	M4 Number of Sprinkler Heads Operating Required if system operated _____ Number of sprinkler heads operating	NFIRS-3 Revision 01/19/99

A FDID * 08013 State * MI Incident Date MM DD 12 30 2009 Station 3 Incident Number * 0001702 Exposure * 000 Delete Change NFIRS - 4 Civilian Fire Casualty

B Injured Person * 1 Male 2 Female **C** Casualty * Number

Doyle W Hamlett 1
 First Name MI Last Name Suffix Casualty Number

D Age or date of birth * Months (for Infants) 56 Age **OR** 10 5 1953 Month Day Year

E1 Race
 1 White
 2 Black
 3 Am. Indian, Eskimo
 4 Asian
 0 Other, multi-racial
 U Undetermined

E2 Ethnicity
 Hispanic

F Affiliation
 1 Civilian
 2 EMS, not fire department
 3 Police
 0 Other

G Date & Time of Injury
 12 30 2009
 Month Day Year Hour Minutes

H Severity *
 1 Minor
 2 Moderate
 3 Severe
 4 Life threatening
 5 Death

I Cause of Injury

1 Exposed to fire products including flame heat, smoke, & gas
 2 Exposed to toxic fumes other than smoke
 3 Jumped in escape attempt
 4 Fell, slipped or tripped
 5 Caught or trapped
 6 Structural collapse
 7 Struck by/or contact with object
 8 Overexertion
 9 Multiple causes
 0 Other
 U Undetermined

J Human Factors Contributing to Injury

None
 Check all applicable boxes

1 Asleep
 2 Unconscious
 3 Possibly impaired by alcohol
 4 Possibly impaired by other drug
 5 Possibly mentally disabled
 6 Physically disabled
 7 Physically restrained
 8 Unattended person

K Factors Contributing to Injury

None
 Enter up to three contributing factors

Contributing factor (1)
 Contributing factor (2)
 Contributing factor (3)

L Activity When Injured

1 Escaping
 2 Rescue attempt
 3 Fire control
 4 Return to fire before control
 5 Return to fire after control
 6 Sleeping
 7 Unable to act
 8 Irrational act
 0 Other
 U Undetermined

M1 Location at Time of Incident

1 In area of origin and not involved
 2 Not in area of origin & not involved
 3 Not in area of origin, but involved
 4 In area or origin and involved
 U Undetermined

M2 General Location at Time of Injury
 Check ONE Box. If undetermined, leave blank and skip to Section N.

1 In area of fire origin Skip To Section N
 2 In building, but not in area
 3 Outside, but not in area Skip to Section M5

M3 Story at Time of Incident
 Complete ONLY if injury occurred INSIDE

Story at START of incident Below Grade

M4 Story Where Injury Occurred
 Story where injury occurred, if different Below Grade from M3

M5 Specific Location at Time of Injury
 Complete ONLY if casualty NOT in area of origin

Specific location at time of injury

N Primary Apparent Symptom

01 Smoke only, asphyxiation
 11 Burns & smoke inhalation
 12 Burns only
 21 Cut, laceration
 33 Strain or sprain
 96 Shock
 98 Pain only

Look up code only if the symptom is NOT found above

Primary apparent symptom

O Primary Area of Body Injured

1 Head
 2 Neck & shoulder
 3 Thorax
 4 Abdomen
 5 Spine
 6 Upper extremities
 7 Lower extremities
 8 Internal
 9 Multiple body parts

P Disposition

Transported to emergency care facility

Remarks Local option

NFIRS-4 Revision 11/17/98

08013

FDID

MI

State

12

30

Incident Date

2009

3

Station

0001702

Incident Number

000

Exposure

Responding
Units/Personnel

Unit	Notify Time	Enroute Time	Arrival Time	Cleared Time
------	-------------	--------------	--------------	--------------

2202 Command-2	04:10:00	04:10:00	04:14:01	09:30:00
----------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00026 Marsala, Anthony	Off Duty	F	Career Fire	

2212 Squad-2 ALS	04:10:00	04:10:00	04:14:01	09:30:00
------------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00037 Ridley, Owen Arthur	Off Duty	F	Career Fire	

2221 Engine-1	04:10:00	04:10:00	04:14:01	09:30:00
---------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00034 Quinn, James Albert	General Alarm St		On-Call Fir	

2222 Engine-2	04:10:00	04:10:00	04:14:01	09:30:00
---------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00036 Ridley, Ronald Scot	General Alarm St		Career Fire	

2223 Engine-3	04:10:00	04:10:00	04:14:01	09:30:00
---------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
FLOR01 Florey, Dawn T	Paid 3 hours		Career Fire	

2232 Truck-2	04:10:00	04:10:00	04:14:01	09:30:00
--------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
QUIN07 Quinn, James D	Paid 3 hours		Career Fire	

2236 Truck-6	04:10:00	04:10:00	04:14:01	09:30:00
--------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00049 Wise, Ronald Letcher	Off Duty	F	Fire Chief	

08013

FDID

MI

State

12

Incident Date

30

2009

3

Station

0001702

Incident Number

000

Exposure

Responding
Units/Personnel

Unit	Notify Time	Enroute Time	Arrival Time	Cleared Time
------	-------------	--------------	--------------	--------------

2237 Truck-7	04:10:00	04:10:00	04:14:01	09:30:00
--------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00035 Quinn, Paul Tyson	Paid 3 hours			Career Fire

2241 Ladder-1	04:10:00	04:10:00	04:14:01	09:30:00
---------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
LIND01 Lindemulder, James R	On Duty	Fi	On-Call Fir	

2271 Rescue-1	04:10:00	04:10:00	04:14:01	09:30:00
---------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00071 Hinz, Brandon Charles	Off Duty	F	Career Fire	

POV Private Vehicle	04:10:00	04:10:00	04:14:01	09:30:00
---------------------	----------	----------	----------	----------

Staff ID\Staff Name	Activity	Rank	Position	Role
00004 Bierhalter, Keith Vincent	Off Duty	F	Career Fire	
00015 Henry, David Lee	Off Duty	F	On-Call Fir	
00031 Quinn, Robert John	Off Duty	F	On-Call Fir	
00077 Guminski, Dustin Randy	Off Duty	F	On-Call Fir	
BEMI01 Bemis, Nathan S	Off Duty	F	On-Call Fir	
GARV01 Garvison, Nicholas R	Off Duty	F	On-Call Fir	
HAIN01 Haines, Arthur W	Off Duty	F	On-Call Fir	
HENR01 Henry, Kristina L	Off Duty	F	On-Call Fir	
HURN01 Hurn, Amber M	Off Duty	F	On-Call Fir	
MONT01 Montgomery, Brian K	Off Duty	F	On-Call Fir	
QUIN01 Quinn, Patrick J	Off Duty	F	On-Call Fir	
VANW02 Van Wynen, Robert A	Off Duty	F	On-Call Fir	
WILM01 Williamson, Kristen Marie	Off Duty	F	Probationar	

08013 FDID *	MI State *	MM DD 12 30 Incident Date	YYYY 2009	3 Station	0001702 Incident Number *	000 Exposure *	Responding Personnel
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Staff ID\Staff Name	Unit	Activity	Position	Rank	PayScl	Hrs	HrsPd	Pts
00026 Marsala, Anthony	2202	FIRE Off Duty		CFFCP		5.33	5.33	0.00
00037 Ridley, Owen Arthur	2212	FIRE Off Duty		CFFCP		5.33	5.33	0.00
00034 Quinn, James Albert	2221	STATION General		OCFF1		5.33	5.33	0.00
00036 Ridley, Ronald Scot	2222	STATION General		CFFEP		5.33	5.33	0.00
FLOR01 Florey, Dawn T	2223	PD3HRS Paid 3		CFFEP		5.33	3.00	0.00
QUIN07 Quinn, James D	2232	PD3HRS Paid 3		CFFEP		5.33	3.00	0.00
00049 Wise, Ronald	2236	FIRE Off Duty		FC		5.33	5.33	0.00
00035 Quinn, Paul Tyson	2237	PD3HRS Paid 3		CFFEP		5.33	3.00	0.00
LIND01 Lindemulder, James	2241	FIRE-OD On Duty		OCFF2E		5.33	5.33	0.00
00071 Hinz, Brandon	2271	FIRE Off Duty		CFFEP		5.33	5.33	0.00
00004 Bierhalter, Keith	POV	FIRE Off Duty		CFFEP		5.33	5.33	0.00
00015 Henry, David Lee	POV	FIRE Off Duty		OCFF2L		1.00	5.33	0.00
00031 Quinn, Robert John	POV	FIRE Off Duty		OCFF2L		5.33	5.33	0.00
00077 Guminski, Dustin	POV	FIRE Off Duty		OCFF2L		5.33	5.33	0.00
BEMI01 Bemis, Nathan S	POV	FIRE Off Duty		OCFF2E		5.33	5.33	0.00
GARV01 Garvison, Nicholas	POV	FIRE Off Duty		OCFF2		5.33	5.33	0.00
HAIN01 Haines, Arthur W	POV	FIRE Off Duty		OCFF2E		2.00	5.33	0.00
HENR01 Henry, Kristina L	POV	FIRE Off Duty		OCFF2		5.33	5.33	0.00
HURN01 Hurn, Amber M	POV	FIRE Off Duty		OCFF2E		5.33	5.33	0.00
MONT01 Montgomery, Brian	POV	FIRE Off Duty		OCFF2E		5.33	5.33	0.00
QUIN01 Quinn, Patrick J	POV	FIRE Off Duty		OCFF2		5.33	5.33	0.00
VANW02 Van Wynen, Robert	POV	FIRE Off Duty		OCFF2E		5.33	5.33	0.00
WILM01 Williamson,	POV	FIRE Off Duty		PR		5.33	5.33	0.00

Total Participants: 23

Total Personnel Hours: 114.93

An 'X' next to the unit denotes driver.

A

FDID *	State *	Incident Date	Station	Incident Number	Exposure *	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change	Insurance and \$Loss
08013	MI	12/30/2009	3	0001702	000		

B Estimated Dollar Loss & Value

	Pre-Incident Value	Estimated Loss	Insured Amount	Settlement Amount
Buildings	\$35,000.00	\$35,000.00	\$0.00	\$0.00
Vehicles	\$0.00	\$0.00	\$0.00	\$0.00
Contents	\$3,000.00	\$3,000.00	\$0.00	\$0.00

C Insurance Company

Business name if applicable		Contact Name	
Street or highway			
Post office box		City	
State	Zip Code	Phone Number	
Agent Name		<input type="checkbox"/> Buildings <input type="checkbox"/> Vehicles <input type="checkbox"/> Contents	
Policy Number		Policy Coverage	



FEB 11 2010



FEB 11 2010



NE DO NOT CROSS

POLICE LINE DO NOT CROSS

POLICE LINE DO NOT CROSS

POLICE LINE DO NOT CROSS

FEB 11 2010





Repair Check List-continued . . .

2 of 2

11. Electrical Service-	\$ <u>1,500.00</u>
Electrical wiring system	\$ <u>5,800.00</u>
12. Plumbing – Waste & Supply system	\$ <u>4,600.00</u>
- Fixtures	\$ <u>790.00</u>
- Wall Finishes (Tubs/Showers)	\$ <u>1,100.00</u>
13. HVAC-Service line	\$ <u>500.00</u>
-Heat and/or AC equip. Rep/New	\$ <u>6,000.00</u>
14. Accessory Structures-Repair/Replacement	\$ <u>-0-</u>
15. Public Hazards-Conc. Slabs, Landscaping, Structures, Etc. Repair/Removal	\$ <u>-0-</u>
Total Associated Costs -	\$ <u>54,190.00</u>

Summary Statement: This house in my opinion should be torn down. The fire has caused damage beyond repair. The foundation was in bad shape before the fire and is not reusable. The chimney is loose and looks as though it could fall. This is dangerous and should be taken down soon. There are cats coming and going from the structure and could be a nuisance for surrounding homes and children.

Signed:  RP 3-22-10

Company Name and Address: John Brush Builders, Inc.
6578 111th, Ave.
Fennville, Mi. 49408

CITY OF SOUTH HAVEN

829 PHILLIPS
(Subject Property Address)

**COMPARISON SHEET
OF
STATE EQUALIZED VALUE OF BUILDING OR STRUCTURE
TO ITS
ESTIMATED COST OF REPAIR**

PURSUANT TO SECTION 10-227 OF THE DANGEROUS BUILDINGS AND STRUCTURES ORDINANCE

The following calculation is presented to accurately compare the values as called for by the above referenced ordinance. The State Equalized Value (SEV) includes both the building or structure value along with the land value, and it is published by the Assessor's Office. This same source also publishes the Land Value alone. However the Land Value represents the anticipated value of the land if it were sold on the open market, while the SEV represents approximately half of what the property (with building or structure) would sell for on the open market. Therefore, the Land Value must be divided by two and subtracted from the SEV to accurately obtain the value that represents the SEV of the building or structure on the property. The ordinance then calls for the comparison of the estimated cost of repair to the SEV of the building or structure. If the repair estimate exceeds the SEV of the building or structure (which is approximately half the open market sales value), then the condition exists for "a rebuttable presumption that the building or structure requires immediate demolition".

PLEASE NOTE: This comparison does not prevent an order of demolition if the estimated cost of repair is less than the SEV, but rather allows the Construction Board of Appeals to order compliance with the order within 21 days instead of the 60 days prescribed by the ordinance.

A. State Equalized Value of subject property	<u>\$59,400.</u>
B. Assessor's Land Value	<u>75,000.</u>
C. Land Value divided by two	<u>37,500.</u>
D. SEV of building or structure (Property SEV minus half of Land Value)	<u>21,900.</u>
E. Estimated Cost of building or structure repair	<u>54,190.</u>

If the value on line 'E' above exceeds the value on line 'D' above, then "a rebuttable presumption that the building or structure requires immediate demolition exists".

The Construction Board of Appeals may order the demolition with a 21 day time limit.

The Construction Board of Appeals may not order the demolition with less than a 60 day time limit.

Prepared by: WILLIAM K. SPAETH Date: MAR. 24, 2010

General Property Information[\[Back to Non-Printer Friendly Version\]](#) [\[Send To Printer\]](#)

Parcel: 80-53-580-026-01

Property Address	[collapse]
829 PHILLIPS ST SOUTH HAVEN, MI 49090	

Owner Information	[collapse]
BOWERS JOSEPH 2246 FARRINGTON AVE ALEXANDRIA, VA 22303-1551	Unit: 80-53

Taxpayer Information	[collapse]
DAVIS JOHN 829 PHILLIPS PO BOX 523 SOUTH HAVEN, MI 49090	

General Information for Tax Year 2009				[collapse]
Property Class:	201	Assessed Value:	\$59,400	
School District:	80010 - DISTRICT 80010	Taxable Value:	\$40,578	
State Equalized Value:	\$59,400	Map #	B592	
BOAT SLIPS	0	Date of Last Name Chg:	01/08/2007	
Date Filed:	05/01/2009			
Principal Residence Exemption (2009 May 1):	23.0000 %			
Principal Residence Exemption (2009 Final):	23.0000 %			
Principal Residence Exemption (2010 May 1):	23.0000 %			
Previous Year Info	MBOR Assessed	Final S.E.V.	Final Taxable	
2008	\$59,400	\$59,400	\$38,868	
2007	\$59,400	\$59,400	\$37,995	

Land Information	[collapse]		
Acreage:	0.61	Frontage:	0.00 Ft.
Zoning Code:	R-1B	Depth:	0.00 Ft.
Land Value:	\$75,000	Mortgage Code:	N/A
Land Improvements:	\$3,600	Lot Dimensions/Comments:	IRREGULAR SHAPED LOT
Renaissance Zone:	NO		
ECF Neighborhood Code:	00208 - COMMERCIAL OTHER		

Legal Information for 80-53-580-026-01	[collapse]
841-189 B592 1-17 LOT 26 EX BEG AT NE COR OF LOT 26, TH SLY ALG E L OF SD LOT 260.8' TO SLY L OF SD LOT, TH SWLY SLG SD SLY L 172' TO ELY ROW L OF PHILLIPS ST, TH NWLY ALG SD ROW 10', TH N 44 DEG 57'48" E 142.09', TH N 0 DEG 51' 42" W 174.15', TH N 4 DEG 41' 8" W 100.31' TO NW COR OF SD LOT, TH E ALG N L OF SD LOT 34.4' TO BEG OF DES SUPERVISOR'S PLAT OF PHILLIPS ST ADD TO SOUTH HAVEN	

Sales Information

1 sale record(s) found.						
Sale Date	Sale Price	Instrument	Grantor	Grantee	Terms Of Sale	Liber/Page
12/01/2001	\$0.00	WD	BOWERS JOSEPH	DAVIS JOHN	PURSUANT TO LC	

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[Privacy Policy](#)

80-53-580-026-01
 Property Class: 201
 Map #: B592

2009 Est. T.C.V. BOWERS JOSEPH
 Printed 02/05/2010 829 PHILLIPS ST
 SOUTH HAVEN CITY VAN BURE SOUTH HAVEN, MI 49090

Land Value Estimates for Land Table 00208.COMMERCIAL OTHER

Description	Frontage	Depth	Front	Depth	Rate	%Adj.	Reason	Value
COMMERCIAL 201 NON-MAINSTR			26572 SqFt		11.28	25	LOC & SHAPE	74,933
0.61 Total Acres Total Est. Land Value =								74,933

< Land Improvement Cost Estimates >

Description	Rate	CountyMult.	Size	%Good	Cash Value
Commercial/Industrial Local Cost Land Improvements					
PUBLIC WATER	2000.00	1.00	1.0	92	1,840
PUBLIC SEWER	2000.00	1.00	1.0	92	1,840
Total Estimated Land Improvements True Cash Value =					3,680

Cost Est. for Res. Bldg: 1 Single Family 2 STORY Cls D Blt 0

(11) Heating System: Forced Warm Air with Ducts
 Ground Area = Size for Rates = 1980 SF Floor Area = 3960 SF.

Stories	Exterior	Foundation	Rate	Bsmnt-Adj	Heat-Adj	Size	Cost
2	Story Siding	Basement	68.99	0.00	1.31	1980	139,194

Other Additions/Adjustments Rate Size Cost

(13) Plumbing
 3 Fixture Bath 1650.00 3 4,950

(14) Water/Sewer
 Public Water 912.00 1 912
 Public Sewer 912.00 1 912

(16) Porches
 WCP (1 Story), Standard 17.83 280 4,992
 CGEP (1 Story), Standard 46.61 72 3,356

(16) Deck/Balcony
 Treated Wood, Standard 5.95 352 2,094

County Multiplier = 1.08 => Cost New = 168,924

Phy/Ab.Phy/Func/Econ/Comb.%Good= 46/100/100/ 70/32.2, Depr.Cost = 54,393
 ECF (COMMERCIAL OTHER) 1.370 => TCV of Bldg: 1 = 74,519

Cost Est. for Res. Bldg: 2 Single Family 1 STORY Cls D Blt 0

(11) Heating System: Forced Warm Air with Ducts
 Ground Area = Size for Rates = 504 SF Floor Area = 504 SF.
 Stories Exterior Foundation Rate Bsmnt-Adj Heat-Adj Size Cost
 1 Story Siding Slab 58.37 -11.20 0.66 504 24,106

Other Additions/Adjustments Rate Size Cost

(14) Water/Sewer
 Public Water 912.00 1 912
 Public Sewer 912.00 1 912

County Multiplier = 1.08 => Cost New = 28,005

Phy/Ab.Phy/Func/Econ/Comb.%Good= 46/100/100/ 70/32.2, Depr.Cost = 9,018
 ECF (COMMERCIAL OTHER) 1.370 => TCV of Bldg: 2 = 12,354

2009 Est. T.C.V. 80-53-580-026-01 (Value overridden by Assessor)= 118,800

Est. TCV/Total Floor Area = 26.61, Most recent sale 12/01/2001 for

2008 Assessed MBOR S.E.V. Base for Cap C.P.I.
 59,400 59,400 59,400 38,868 4.40

2009 New Eq. Adjustment Loss Additions Tax Adjustment Losses
 1,710

2009 Assessed MBOR S.E.V. Capped ->Taxable<- PRE/MBT
 59,400 59,400 59,400 40,578 40,578 9,333

*2009
 LOSS
 \$6,200*

GEORGE S. DUNN

ATTORNEY AND COUNSELOR
401 CENTER STREET
SOUTH HAVEN, MICHIGAN 49090
TELEPHONE: 269-637-8405
FAX: 269-637-7243

MAR 02 2010

MEMBER OF FLORIDA BAR

February 23, 2010

City of South Haven
Doug Brousseau, Assessor
539 Phoenix Street
South Haven, MI 49090

RE: Joseph Bowers-John Davis property transaction

Dear Mr. Brousseau:

Please find enclosed Property Transfer Affidavit for filing with reference to the above mentioned property transaction.

Sincerely,


George S. Dunn
Attorney at Law

GSD/ldf
Enclosure

cc: Joseph Bowers
John Davis

MAR 02 2010

This form is issued under authority of
P.A. 415 of 1994. Filing is mandatory.

Property Transfer Affidavit

This form must be filed whenever real estate or some types of personal property are transferred (even if you are not recording a deed). It is used by the assessor to ensure the property is assessed properly and receives the correct **taxable value**. It must be filed by the new owner with the **assessor for the city or township** where the property is located within **45 days** of the transfer. If it is not filed timely, a penalty of \$5/day (maximum \$200) applies. The information on this form is NOT CONFIDENTIAL.

1. Street Address of Property 829 Phillips Street	2. County Van Buren	4. Date of Transfer (or land contract was signed) February 4, 2010
3. City/Township/Village of Real Estate South Haven	<input checked="" type="checkbox"/> City <input type="checkbox"/> Township <input type="checkbox"/> Village	5. Purchase Price of Real Estate \$1.00
6. Property Identification Number (PIN). If you don't have a PIN, attach legal description. 80-53-580-026-01 See attached legal		PIN. This number ranges from 10 to 25 digits. It usually includes hypens and sometimes includes letters. It is on the property tax bill and on the assessment notice.
7. Seller's (Transferor) Name Joseph Bowers & Mieko Bowers	8. Buyer's (Transferee) Name and Mailing Address John Davis 829 Phillips Street; PO Box 523 South Haven, MI 49090	
Items 9 - 14 are optional. However, by completing them you may avoid further correspondence.		8a. Buyer's (Transferee) Telephone Number
Transfers include deeds, land contracts, transfers involving trusts or wills, certain long-term leases and interest in a business. See the back for a complete list.		9. Type of Transfer <input type="checkbox"/> Land Contract <input type="checkbox"/> Lease <input checked="" type="checkbox"/> Deed <input type="checkbox"/> Other (specify) _____
10. Was this property purchased from a financial institution? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12. Amount of Down Payment	
11. Is the transfer between related persons? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	14. Amount Financed (Borrowed)	
13. If you financed the purchase, did you pay market rate of interest? <input type="checkbox"/> Yes <input type="checkbox"/> No		

EXEMPTIONS

The Michigan Constitution limits how much a property's **taxable value** can increase while it is owned by the same person. Once the property is transferred, the **taxable value** must be adjusted by the assessor in the following year to 50 percent of the property's usual selling price (**State Equalized Value**). Certain types of transfers are exempt from adjustment. Below are brief descriptions of the types of exempt transfers; full descriptions are in MCL Section 211.27a(7)(a-n). If you believe this transfer is exempt, indicate below the type of exemption you are claiming. If you claim an exemption, your assessor may request more information to support your claim.

- transfer from one spouse to the other spouse
- change in ownership solely to exclude or include a spouse
- transfer of that portion of a property subject to a life lease or life estate (**until** the life lease or life estate expires)
- transfer to effect the foreclosure or forfeiture of real property
- transfer by redemption from a tax sale
- transfer into a trust where the settlor or the settlor's spouse conveys property to the trust and is also the sole beneficiary of the trust
- transfer resulting from a court order unless the order specifies a monetary payment
- transfer creating or ending a joint tenancy if at least one person is an original owner of the property (or his/her spouse)
- transfer to establish or release a security interest (collateral)
- transfer of real estate through normal public trading of stocks
- transfer between entities under common control or among members of an affiliated group
- transfer resulting from transactions that qualify as a tax-free reorganization
- transfer of qualified agricultural property when the property remains qualified agricultural property and affidavit has been filed.
- transfer of qualified forest property when the property remains qualified forest property and affidavit has been filed.
- transfer of land with qualified conservation easement (land only - not improvements)
- other, specify: _____

CERTIFICATION

I certify that the information above is true and complete to the best of my knowledge.

Owner's Signature 	Date 2/4/2010	If signer is other than the owner, print name and title
Daytime Phone Number 301-351-5552	E-mail Address lmcgilvrey@aol.com	

