

Stephen and Bonnie Murray
111 So 17th St
La Crosse, WI

August 24, 2013

Teri Lehrke, City Clerk
400 La Crosse Street
La Crosse, WI

Dear Teri Lehrke:

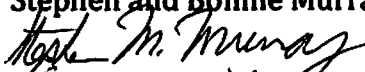

Recently we decided to sell our rental property at 218 No. 20th St. in La Crosse. Our realtor, Chris Richgels, discovered that our property is currently not registered as a rental due to a 2008 ordinance adopted by the city. We bought this rental house in 2005 and fulfilled the required compliance terms to continue as rental property under our ownership. We assumed the property automatically registered as rental because of our 2005 documentation of compliance. For the past 8 years we have rented to graduate students at UWL providing a clean and safe environment at a low cost. We feel that the appearance of our property uplifts the neighborhood and that it is in sound condition. Unfortunately our oversight on registration now puts us in a difficult position as we no longer feel we can continue as a landlord.

Without being registered as a rental property, we will lose the parent who is looking for a rental for a son or daughter at UWL; that was our situation 8 yrs ago. It also eliminates the investor who is looking to buy a college rental. This neighborhood is densely college rental. We have rental behind, on the backside of the whole block, on the two properties to the left of our house and on the whole side of the block across the street. Our home buffers the four residential properties on our right, two of which are presently for sale. Our market is for the rental buyer. If we lose that option, our chance for selling diminishes greatly.

Our hardship lies in owning and maintaining our own residence at 111 Main Street and the rental at 218 N. 20th Street. We know we will be paying a mortgage, utilities, and maintenance on the rental while it is for sale along with the costs of our own home. But if we don't sell the rental quickly, we will not only enter another tax year owning two properties but we will also not be able to rent the property until/ if the moratorium is lifted.

As we near 65 years of age, we are finding it difficult to care for two properties, both physically, and financially. Therefore, we ask you to consider our letter of hardship and approve it to be presented to the Judiciary and Administrative Commission so that they may review our request and amend Ordinance 8.0171 to allow our property to be registered as a rental.

Thank you,
Stephen and Bonnie Murray



email: smmurray49@hotmail.com
608-784-2221

August 24, 2013

Stephen and Bonnie Murray
111 So 17th St
La Crosse, WI

Teri Lehke, City Clerk
400 La Crosse Street
La Crosse, WI

Dear Teri Lehke:

Recently we decided to sell our rental property at 218 N. 20th St in La Crosse. Our
neighbor, Chris Richtols, discovered that our property is currently not registered as a
rental due to a 2008 ordinance adopted by the city. We bought this rental house in
2005 and fulfilled the required compliance terms to continue as rental property
under our ownership. We assumed the property automatically registered as rental
because of our 2005 documentation of compliance. For the past 8 years we have
rented to graduate students at UW, providing a lease and safe environment at a low
cost. We feel that the appearance of our property reflects the neighborhood and that
it is in sound condition. Unfortunately our oversight on registration has put us in
a difficult position as we no longer feel we can continue as a landlord.

Without being registered as a rental property, we will lose the parent who is looking
for a rental for a son or daughter at UW, that was our situation 8 years ago. It also
eliminates the investor who is looking to buy a college rental. This neighborhood is
densely college rental. We have rental behind, on the backside of the whole block, on
the two properties to the left of our house and on the whole side of the block across
the street. Our house buffers the four residential properties on our right, two of
which are presently for sale. Our market is for the rental buyer. If we lose that
option, our chance for selling diminishes greatly.

Our hardship lies in owning and maintaining our own residence at 111 Main Street
and the rental at 218 N. 20th Street. We know we will be paying a mortgage, utilities,
and maintenance on the rental while it is for sale along with the costs of our own
home. But if we don't sell the rental quickly, we will not only enter another tax year
owning two properties but we will also not be able to rent the property until the
mortgage is lifted.

As we have 8 years of age, we are finding it difficult to care for two properties, both
physically and financially. Therefore we ask you to consider our letter of hardship
and approve it to be presented to the Judiciary and Administrative Commission so
that they may review our request and amend Ordinance 8.0171 to allow our
property to be registered as a rental.

Thank you,
Stephen and Bonnie Murray

**Enclosures for Bonnie and Stephen Murray
218 North 20th Street
La Crosse, Wi**

- 1) Rental Inspection when we purchased the house**
- 2) Warranty Deed**
- 3) Certificate of Rental Compliance Fee**
- 4) Certificate of Compliance State Transfer**
- 5) Stipulation Rental Unit Energy Form**
- 6) State Farm Rental Insurance (2)**
- 7) Rental Weatherization Inspection (2)**
- 8) Picture of Property**

**Submitted to Teri Lehrke (City Clerk)
August 27, 2013**

Enclosures for Bonnie and Stephen Murray
218 North 30th Street
La Crosse WI

- 1) Rental inspection when we purchased the house
- 2) Warranty Deed
- 3) Certificate of Rental Compliance Fee
- 4) Certificate of Compliance State Transfer
- 5) Stipulation Rental Unit Energy Form
- 6) State Farm Rental Insurance (2)
- 7) Rental Westhollow Inspection (2)
- 8) Picture of Property

Submitted to Teri Lohrke (City Clerk)
August 27, 2013



CITY OF LA CROSSE
DEPARTMENT OF BUILDING AND INSPECTIONS
 400 La Crosse Street, La Crosse, Wisconsin 54601

Third Floor - City Hall

RENTAL INSPECTION- RESIDENTIAL

Number: RISP2005-1420

Printed: 7/15/2005

Applicant

Approval Date: 7/15/2005

Name: JAY D, KELLY ANN MCHENRY
 Address: 319 LONG COULEE RD
 HOLMEN, WI 54636-7914

COPY

Parcel

Parcel Number: 17020061020 Zoning:
 Address: 218 20TH ST N
 Section: Township: Range:
 Addition: Block: Lot(s):
 Legal Description: FIRST ADDN TO SPIERS ADDN LOT 6 BLOCK 5 LOT SZ: 47.14 X 140

Contractors

Fees and Receipts:	Description	Amount
FEE2005-2324	RENTAL INSPECTION - SALE OF PROPERTY	\$35.00
Total Fees:		\$35.00
Total Receipts:		\$0.00

Certificate of Residential Rental Inspection

This certifies that the above captioned residential rental premises have been inspected for compliance with visible minimum building maintenance code standards.

Kenneth M. Dentice
 Kenneth M. Dentice
 Director of Building and Inspections

By: Young, Ed
 District Building Inspector

This inspection certificate does not indicate or imply any type of guarantee or warranty regarding this property.

Comments:
 SINGLE FAMILY NEED 35 DOLLARS AND AFF

1427124

LACROSSE COUNTY
REGISTER OF DEEDS
DEBORAH J. FLOCK

RECORDED ON
07/21/2005 02:11PM

REC FEE: 13.00
TRANSFER FEE: 337.50
EXEMPT #:

PAGES: 2

STATE BAR OF WISCONSIN FORM
WARRANTY DEED

Document Number

THIS DEED, made between Jay D. McHenry and Kelly A. McHenry, Grantors, and Stephen M. Murray and Bonnie J. Murray, Grantees, husband and wife, as survivorship marital property.

WITNESSETH, that the said Grantor, for a valuable consideration, conveys to Grantees the following described real estate in La Crosse County, State of Wisconsin:

Lot Six (6) in Block Five (5) of First Addition to Spier's Addition to the City of La Crosse, La Crosse County, Wisconsin

Recording Area

Matthew R. Cromheecke
205 Green Street
Onalaska, WI 54650

Together with all appurtenant rights, title and interests.

Parcel Identification Number: 17-20061-20
This is not homestead property.

Grantor warrants that the title to the Property is good, indefeasible in fee simple and free and clear of encumbrances except: Any defects, liens, encumbrances, adverse claims, easements or other matters shown on public record.

Dated this 18th day of July, 2005.

* _____

Jay D. McHenry
*Jay D. McHenry

* _____

Kelly A. McHenry
*Kelly A. McHenry

AUTHENTICATION

Signature(s) _____ authenticated this _____ day of _____, _____.

ACKNOWLEDGMENT

STATE OF WISCONSIN)
LA CROSSE COUNTY) ss.

* _____
TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____ authorized by § 706.06, Wis. Stats.)

Personally came before me this 18 day of July, 2005, the above named Jay D. McHenry and Kelly A. McHenry to me known to be the person who executed the foregoing instrument and acknowledged the same.

THIS INSTRUMENT WAS DRAFTED BY
Lee J. Fehr
FEHR LAW OFFICE
205 Green Street, Onalaska, WI 54650

Dawn R. Christensen
*Dawn R. Christensen Notary Public, State of Wisconsin
My Commission is permanent. (If not, state expiration date: 1/25/2009)

(Signatures may be authenticated or acknowledged. Both are not necessary.)

*Names of persons signing in any capacity must be typed or printed below their signature.

RECEIPT

\$ 11.00

DATE 2-10-06

RECEIVED OF

Bonnie Murray

Element

AND

no

DOLLARS

100

FOR

Cert of compliance

LACROSSE COUNTY REGISTER OF DEEDS

BY

Rk

Commerce control number

CERTIFICATE OF COMPLIANCE

Rental Unit Energy Efficiency Standards

Type or print using black ink

Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m)]

The Department of Commerce does not discriminate on the basis of disability in the provision of services or in employment. If you need this printed material interpreted or in a different form or if you need assistance in using this service, please contact us at our voice relay number: TTY 608-264-8777.

1442439

LACROSSE COUNTY
REGISTER OF DEEDS
DEBORAH J. FLOCK

RECORDED ON
02/10/2006 10:43AM

REC FEE: 11.00
TRANSFER FEE:
EXEMPT #:

PAGES: 1

Owners name(s): Stephen & Bonnie Murray		Rental building location - Street address: 218 North 20th Street	
Street address: 111 South 17th street		City: La Crosse	County: La Crosse
City: La Crosse, WI	State & Zip Code: 54601	Number of rental buildings on this property: 1	Total number of rental units: 1
Owners telephone number including area code: (608) 784-2221	Has this building ever been issued a stipulation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Stipulation Number: S.101264	

Legal description of rental unit property (you may attach a separate sheet):
Lot 6 in Block 5 of First Addition to Spier's Addition to the City of La Crosse, La Crosse County, Wisconsin

Return to:
**Stephen Murray
111 So 17th St
La Crosse, WI 54601**

PARCEL IDENTIFICATION NUMBER:(PIN)

PIN: **17-20061-20**

Instructions: This certificate is to be completed and signed by an inspector currently licensed by the Department of Commerce for Rental Unit Energy Efficiency Inspection. **TO CLEAR THE TITLE ON THIS PROPERTY THIS ORIGINAL DOCUMENT MUST BE RECORDED WITH THE REGISTER OR DEEDS.** Notice to inspectors: Per Comm 67.08 (2), the yellow copy of the certificate must be forwarded to the department within 15 days of issuance. A copy of the Field Inspection Report (SBD7313-A) should be attached to the yellow Commerce copy.

Requirement	Insulation Level		Fail dates	Pass date	Commerce exemption number, or comments	NOT		Inspection dates	
	Initial	Final				Applicable	Accessible		
1 Doors				1				1	7/8/05
2 Windows			X	2				2	1/31/06
3 Caulking			X	2				3	
4 Weather-stripping				1					
5 Blower door test						X			
6 Box sill	R=	R=		1			X		
7 Floors over vented spaces	R=	R=				X			
8 Forced air ducts	R=	R=		1					
9 Steam heating pipes	R=	R=				X			
10 Hydronic heating pipes	R=	R=				X			
11 Domestic water pipes	R=	R=				X			
12 Shower flow restricters				1					
13 Access panels and doors	R=	R=		1		X			
14 Attic insulation	R=	R=		1				X	
15 Moisture control: attic/-crawl space				1					

Purpose: Section 101.122 (4) and (6), Wis. Stats, requires that a properly authorized Certificate of Compliance, Stipulation, or Waiver accompany the transfer documents at the time of recording. This process is further explained in Chapter Comm 67.08 and 67.10, Wis. Admin. Code. Receipt of the Certificate of Compliance form a currently licensed inspector is proof of conformance with energy conservation standards of Comm 67.05. In lieu of the Certificate of Compliance, the purchaser may accept responsibility for future conformance with either a Stipulation or a Waiver.

Certificate of Compliance: The rental unit described above is certified as meeting the minimum rental energy efficiency standards of Comm 67. Each applicable item on the checklist complies with Comm 67.05 or has been issued an exemption number. Certificate not valid unless signed and dated by inspector.

Print inspector's name: Carol Losen	Inspector telephone number: (608) 526-4567	Certified inspector number: 72072	STATE OF WI TRANSFER AUTHORIZATION NUMBER C-120186
Date rental unit certified: 1/31/06	This certificate is valid for life of building(s) if recorded at Register of Deeds.		
Inspector signature: <i>Carol Losen</i>	Commerce Transfer Authorization number: C- 120186		

This instrument was drafted by: Wisconsin Dept of Commerce, Rental Weatherization, PO Box 7302, Madison WI 53707-7302 Telephone: (608) 267-2240

Commerce Control Number:

STIPULATION Rental Unit Energy Efficiency Standards

Type or print using black ink

Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m)]

The Department of Commerce does not discriminate on the basis of disability in the provision of services or in employment. If you need this printed material interpreted or in a different form or if you need assistance in using this service, please contact us, TTY 608-264-8777.

Seller's Name(s): Jay & Kelly McHenry		Rental Building Location - Street Address: 218 N. 20th St.		
Seller's Street Address: 319 Long Coulee Rd.		City: La Crosse	County: La Crosse	
City: Holmen	State: WI	Zip Code: 54636	Number of rental buildings on this property: 1	Number of rental units in building: 1
Seller's Telephone Number (including area code): (608-526-6181)				

Legal Description of Rental Unit Property (You may attach a separate sheet):

Lot Six (6) in Block Five (5) of First Addition to Spiers Addition to the City of La Crosse, La Crosse County, Wisconsin

Return To:

**Stephan Murray
111 South 17th St.
LaCrosse WI 54601**

PARCEL IDENTIFICATION NUMBER (PIN):

PIN:

Instructions: Information concerning the seller and the property should be filled in above. Information concerning the buyer and the buyer's signature should be filled in below. The Stipulation must then be submitted to the Department of Commerce or to a Commerce agent for validation. A list of these agents is available by calling (608) 267-4405. General questions should be directed to (608) 267-2240. If there is not a Commerce agent in your area, send the Stipulation and a non-refundable \$50 filing fee (do not send cash) to the address listed below.* Make the check payable to the Wis. Dept. of Commerce. The validated Stipulation will be returned to the buyer as noted below, or to another party as designated in the "Return To" block above. **SEE BACK OF THIS FORM FOR ADDITIONAL INFORMATION.**

This document is valid only if no previous Stipulation or Waiver is currently on file for this property.

STIPULATION AGREEMENT

Fiscal Code: 7646

CHK # 8754

I (we) agree to bring the above described property into compliance with the Comm 67 energy efficiency standards no later than one year from date of validation.

Print Buyer's Name(s): Stephen & Bonnie Murray	Buyer's Signature(s): <i>Stephen & Bonnie Murray</i>	Date Signed: 6/29/05
Buyer's Street Address: 111 South 17th St	Buyer's City, State, and Zip Code: La Crosse, WI 54601	Buyer's Telephone Number (including area code): 608 784-2221

Validated by: <input checked="" type="checkbox"/> Department of Commerce <input type="checkbox"/> Commerce agent	Auth or Tax Rev #:	Date Validated: 6/29/05	Commerce Transfer Authorization Number: s. 101264
Official's Signature: <i>John A. Spalding</i>	Official's Title: SECTION CHIEF	Expiration Date (one year from date validated): 6/29/06	Municipality and County:
Print Official's Name: JOHN A. SPALDING			

**STATE OF WI
TRANSFER
AUTHORIZATION
NUMBER
S-101264**

TRANSFER OF STIPULATION If the residential property described above is transferred within one year of the validation date of this Stipulation and before the building(s) has been certified in compliance with Comm 67, the new buyer must sign below and forward a copy of this document to Commerce at the address listed below.* By signing below the new buyer accepts responsibility to comply with this Stipulation by the expiration date listed above. Transfer of the property after the expiration date is not valid without conformance to the energy standards.

Print New Buyer's Name(s):	New Buyer's Signature(s):	Date Signed:
New Buyer's Street Address:	New Buyer's City, State and Zip Code:	New Buyer's Telephone Number (including area code):

TRANSFER OF STIPULATION If the residential property described above is transferred within one year of the validation date of this Stipulation and before the building(s) has been certified in compliance with Comm 67, the new buyer must sign below and forward a copy of this document to Commerce at the address below.* By signing below the new buyer accepts responsibility to comply with this Stipulation by the expiration date listed above. Transfer of the property after the expiration date is not valid without conformance to the energy standards.

Print New Buyer's Name(s):	New Buyer's Signature(s):	Date Signed:
New Buyer's Street Address:	New Buyer's City, State and Zip Code:	New Buyer's Telephone Number (including area code):

*This instrument was drafted by: Wisconsin Department of Commerce, Rental Weatherization Program, PO Box 7302, Madison, WI 53707-7302 Telephone: (608) 267-2240

RENTAL DWELLING
 RENTAL CONDO UNIT
APPLICATION

State Farm Fire and Casualty Company

POLICY NUMBER ONLY

Bloomington, Illinois

New	Rev.	Schedule	E of I	of	Policy Number	Effective Date	7-18-05	Other State Farm insurance:	<input checked="" type="checkbox"/> Auto	<input checked="" type="checkbox"/> Fire	<input type="checkbox"/> Life	<input type="checkbox"/> Health	<input type="checkbox"/> None	Term	12 Months
NAME Please print		Last Name		First Name		Middle Name or Initial		Co-applicant's Name (if applicable)							
Murray		Stephen		Bonnie											
Mailing address		Number and Street		City or Town		State		ZIP Code							
111 7 th St S		LaCrosse		WI		54601									
Location of premises		(if different from mailing address)		City or Town		State		ZIP Code		County					
218 N 20 th St		LaCrosse		WI		54601		LaCrosse							
Applicant's Social Security Number				Co-applicant's Social Security Number				Telephone Number				<input type="checkbox"/> H <input type="checkbox"/> B			
392-50-5526				399-46-4029				605-784-2205							
The named applicant is:								Applicant's specific occupation							
<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Partnership (give names of partners in Remarks) <input type="checkbox"/> Other (describe)								Teacher							

Until a policy is issued, State Farm will provide coverage to the applicant and his or her legal representative subject to the following conditions:

- Coverage is provided only on the property described.
- All the declarations, terms, and conditions of the policy applied for apply to this Binder.
- This Binder will no longer be effective:
 - when the policy is issued; or
 - when it is canceled in accordance with policy provisions.
- If a loss occurs during the term of this Binder, any unpaid premium balance will be calculated on the amount originally insured.

Dated at LaCrosse, WI this 18 day of July, year 2005
Susan Hendines LSAS Agent

REGARDING INSURANCE TO VALUE

The State Farm replacement cost is an estimated replacement cost based on general information about your building. It is developed from models that use cost of construction materials and labor rates for like structures in the area. The actual cost to replace your building may be significantly different. State Farm does not guarantee that this figure will represent the actual cost to replace your building. You are responsible for selecting the appropriate amount of coverage and you may obtain an appraisal or contractor estimate which State Farm will consider and accept, if reasonable. Higher coverage amounts may be selected and will result in higher premiums.

Forms:	<input type="checkbox"/> Special Form	<input type="checkbox"/> Basic Form	<input type="checkbox"/> Rental Condominium Unit (rented 100% of the time)	Deductibles:	<input type="checkbox"/> \$500	<input checked="" type="checkbox"/> Other	1,000				
COVERAGE	SEC. I	Limits of Insurance		Base Premium	RDP Dwelling Loss Settlement Options - select one:	Premium	Earthquake Coverage Endorsement Zone _____ Deductible _____ % Does building have masonry veneer? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is coverage desired on veneer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Premium			
		A. Dwelling (for Condo Units, use Building Schedule)	\$ 112,500						\$ 495	<input type="checkbox"/> Replacement Cost - Similar Construction (incl. 80% or more IV on Special Form) <input type="checkbox"/> Modified Replacement Cost - Common Construction (incl. < 80% IV on Special Form and on all Basic Form policies)	\$
		Dwelling Extension (total amount including 10% from Coverage A) (N/A for condo units)	\$ 11250								
		B. Personal Property (total amount) (for Condo Units, use Building Schedule)	\$ 5625								
	C. Loss of Rents	Actual Loss Sustained									
	D. Loss Assessments (condo units only)	\$1,000 Other									
SEC. II	L. Business Liability (each occurrence)	\$300,000 \$ Other									
	M. Premises Medical Payments	\$1,000 RDP \$5,000 RCUP									
SFPP Account Number		44B 0052 035205		Surcharge (if app.) \$	Amount paid \$	Balance due \$	TOTAL PREMIUM \$ 495.00				

OTHER INTEREST	<input type="checkbox"/> Mtg. <input type="checkbox"/> Named add'l insured (explain interest in Remarks)	State Bank of LaCrosse, ISA OA			BILLING
	401 Main St LaCrosse, WI 54601	ZIP Code	Loan Number	Mtg. Subset Code	
	<input type="checkbox"/> 2nd mtg. <input type="checkbox"/> Named add'l insured (explain interest in Remarks)	Svc. agt. _____ (Give name and address)			END. <input checked="" type="checkbox"/> Insured BILLS: <input type="checkbox"/> Mtg. <input type="checkbox"/> Svc. Agt.
		ZIP Code	Loan Number	Mtg. Subset Code	

I understand that coverage is: <input checked="" type="checkbox"/> provided by this application. <input type="checkbox"/> not provided until this application is approved by State Farm's Underwriting Department.	Agent's Code Stamp	Date and Time of Application
I am applying for the insurance indicated and the information on this application is correct. I understand that the premium charged for this policy must comply with State Farm's rates and may be revised.	K. VISKER FIRE 49 MAFO LA CROSSE WI	Mo. Day Yr. 7 7 2005
Applicant's Signature X <u>Bonnie Murray</u>	49-6533 05-F735	Hour <u>11:00</u> <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.



State Farm Fire and Casualty Company
 A Stock Company With Home Offices in Bloomington, Illinois

8500 State Farm Way
 Woodbury, MN 55125-3379

Named Insured

W-05-6533-F735F R

MURRAY, STEPHEN & BONNIE
 111 7TH ST S
 LA CROSSE WI 54601-4151

DECLARATIONS PAGE

Policy Number 99-EW-0926-

Policy Period 12 Months
Effective Date JUL 18 2005
 The policy period begins and ends at the standard time at the residence of the insured.



RENTAL DWELLING POLICY- SPECIAL FORM 3

Automatic Renewal - If the policy period is shown as 12 months, this policy will be renewed automatically at the end of the policy period. The same rates, terms, conditions, coverages, exclusions, and forms in effect for each succeeding policy period. If this policy is terminated, we will issue a Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Location of Premises
 218 N 20TH ST
 LACROSSE WI 54601-3701

Named Insured: Individual

Coverages & Property	Limits of Liability	Inflation Coverage Index: 211.0
Section I		Deductibles - Section I
A Dwelling	\$ 112,600	Basic \$
Dwelling Extension	\$ 11,260	
B Personal Property	\$ 5,630	
C Loss of Rents	Actual Loss	
Section II		In case of loss under this policy, the deductible per occurrence and will be deducted from loss. Other deductibles may apply - refer to policy form.
L Business Liability (Each Occurrence)	\$ 300,000	
M Medical Payments (Each Person)	\$ 1,000	
Forms, Options, & Endorsements		Policy Premium
Special Form 3	FP-8103.3	Discount Applied:
Amendatory Endorsement	FE-8249.2	Home Alert
Fungus (Including Mold) Excl	FE-5722	
Debris Removal Endorsement	FE-7540	

Other limits and exclusions may apply - refer to your policy

Your policy consists of this page, any endorsements and the policy form. Please keep these together.

Commerce Control No.

Weatherization Field Inspection Report

Stipulation No.
S-

This report will be used by certified weatherization inspectors to inform owners of findings from inspection visits required under Chap. Comm 67. (This is not an inspection for health and safety requirements covered by building codes.) It is not to be filed with the Register of Deeds. Upon completion of the requirements, call the inspector for a final inspection and a Certificate of Compliance.

Owners Names: <i>Bonnie Stephen Steve Mural</i>		Rental building location, street address: <i>218 No 20th</i>	Manager or Other Contact Person:
Street Address: <i>111 So 17th St</i>		City: <i>Kalcosse</i>	Street Address:
City, State, and Zip Code: <i>Kalcosse</i>		County: <i>Kalcosse</i>	City, State, and Zip Code:
Telephone Number, including area code: <i>784-2221</i>		Is This A Multiple-Use Occupancy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Telephone Number, including Area Code:
		Total number of rental units in buildings: <i>1</i>	

NOTE: Submit one report per building!

If OK, check these boxes

If not OK, check the appropriate boxes for the improvement(s) needed.

1. Doors: Needs insulated doors or storm doors, Needs double-glazing or storms on side lites, Needs self-closing devices on storm doors.
2. Windows: Needs double-glazing or storm windows (including basement), Window Repairs: Putty, Glass, Frame. *MISSING ONE - Seal w Silicone*
3. Caulking: Needs caulking → Exterior joints and cracks, Windows and door frames, Utility penetrations, Foundation/sill.
4. Weatherstripping: Needs weatherstripping on cracks larger than 0.1" at → Windows, Exterior Doors, Access panels to vented spaces.
5. Blower door test—Submit documentation per Comm 67.05 (3). Not applicable.
6. Box Sill: Existing R-value = _____ Not accessible, Add R-19, Add R-11
7. Floors over vented spaces: Not applicable Bring up to R-19, Add R-11
8. Forced air supply ducts in vented spaces: not applicable, Not accessible, Add R-5
9. Steam heating pipes in vented space: Not applicable, Not accessible, Add R-4
10. Hydronic heating pipes in vented space: Not applicable, Not accessible, Add R-2
11. Domestic water pipes in vented space: Add R-2 (hot and cold) → Within 5 feet of water heater, Entire length (circulating). Not applicable
12. Shower flow restrictors: No shower facilities, Add restrictors → 3 GPM max
13. Access panels and doors to attics and other vented spaces: Not applicable, Add R-19 if horizontal, Add R-5 if vertical.
14. Attic Insulation: Existing R-value = _____ Not accessible, Insulate to R-38, Add R-19, Add to maximum allowable level (floored attic).
15. Moisture control: Attic → Not accessible, Vent needed = _____ Sq. Ft., (Existing vent area: High: _____ Sq. Ft., Low: _____ Sq. Ft.)
Crawl space: → Not accessible/applicable, Existing vent area = _____ Sq. Ft., Vent needed: _____ Sq. Ft., Need crawl space vapor barrier.

Comments: (Please reference Inspected Area numbers)

Heating equipment should be properly adjusted and maintained for proper efficiency.

Inspector's Name: (Please Print) <i>CAROL LOSEN</i>	Inspector's Certificate Number: <i>72072</i>	Inspector's Business Phone Number w/ Area Code: <i>608-526-4567</i>
Inspector's Signature: <i>Carol Losen</i>	Date Signed: <i>7/5/05</i>	Indicate Visit Number: First <input checked="" type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/>

Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m)].

Nest Egg Inspections

W6658 Hwy D
Holmen, WI 54636

Invoice

DATE	INVOICE #
7/11/200	564

BILL TO
Steve & Bonnie Murray 111 South 17th Street La Crosse, WI 54601

DESCRIPTION	QTY	P.O. NO.	TERMS	PROJECT
			Net 30	
			RATE	AMOUNT
Rental Weatherization Inspection on 7/8/05 at 218 North 20th Street, La Crosse Field Report Follow Up Inspection Certificate of Compliance Paid 7/8/05 Ck# 8774			130.00	130.00
			Total	\$130.00

