

**BUILDING BOARD OF APPEALS**  
**AGENDA**  
**REGULAR MEETING**  
**July 7, 2015**  
**CITY HALL COUNCIL CHAMBERS, 405 MUNICIPAL DRIVE**  
  
**REGULAR SESSION - 7:00 PM**

**I. CALL TO ORDER**

**II. ROLL CALL**

**III. MINUTES APPROVAL**

**IV. VISITOR/CITIZENS FORUM**

*At this time, any person with business before the Board of Adjustment not scheduled on the Agenda may speak to the Board, provided that an official 'Speaker's Request Form' has been completed and submitted to the Board Secretary prior to the start of the meeting. All comments must be directed towards the Chair, rather than individual board members or staff. All speakers must limit their comments to the subject matter as listed on the 'Speaker's Request Form.' No formal action can be taken on these items.*

**V. REGULAR ITEMS**

A. **CASE BBA # 15-01** Public hearing and consideration of approval regarding a city-initiated request for demolition of an "R-3" Single family residential home located on approximately .2647 acres at 1012 Harrison St, legal description of Hilldale Addn Lot 4, Blk 5.

1. Staff Presentation
2. Property Owner Presentation
3. Public Hearing
4. Property Owner Response
5. Staff Response and Summary
6. Action by the Building Board of Appeals Commission

**VI. REPORTS/ANNOUNCEMENTS**

**VII. ADJOURNMENT**

In compliance with the Americans with Disabilities Act, the City of Kennedale will provide for reasonable accommodations for persons attending City Council meetings. This building is wheelchair accessible, and parking spaces for disabled citizens are available. Requests for sign interpreter services must be made forty-eight (48) hours prior to the meetings. Please contact the City Secretary at 817.985.2104 or (TDD) 1.800.735.2989

**CERTIFICATION**

*I certify that a copy of the July 7, 2015, Board of Adjustment & Building Board of Appeals agenda was posted on the City Hall bulletin board next to the main entrance of the City Hall building, 405 Municipal Drive, of the City of*

*Kennedale, Texas, in a place convenient and readily accessible to the general public at all times and said agenda was posted at least 72 hours preceding the schedule time of said meeting, in accordance with Chapter 551 of the Texas Government Code.*

A handwritten signature in cursive script, appearing to read "Katta", written in black ink.

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Board Secretary

**Date:** July 7, 2015.

**Agenda Item No:** REGULAR ITEMS - A.

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**I. Subject:**

**CASE BBA # 15-01** Public hearing and consideration of approval regarding a city-initiated request for demolition of an "R-3" Single family residential home located on approximately .2647 acres at 1012 Harrison St, legal description of Hilddale Addn Lot 4, Blk 5.

**II. Originated by:**

Sandra Johnson, Building Official

**III. Summary:**

**Request:** Request demolition of the residence.

**Applicant:** City of Kennedale

**Location:** 1012 Harrison St. Kennedale, TX 76060

**Background.**

The house is a safety hazard and a nuisance. A new house is being built on the east side of this lot and a vacant lot might encourage another new home to be built.

The house has been boarded up numerous times and always gets broken back into. The house has been a nuisance for the City of Kennedale since 2008. The violations include high grass and weeds as well as being substandard and unsafe.

**STANDARDS FOR SUBSTANDARD BUILDINGS.**

The standards for Substandard Buildings are attached into a separate document.

**STAFF REVIEW.**

The Housing Standards Code Checklist are attached into a separate document as well as photos regarding the code issues.

**STAFF RECOMMENDATION.**

Staff recommends demolition.

Based on the history, the house will continue to be a nuisance and an ongoing financial drain on the city by continuously obligating the city to mow the property.

#### **IV. Recommendation:**

Staff recommends that the Building Board of Appeals find that the building is substandard in violation of the standards in section 15-49 of the City of Kennedale ordinances and either:

- 1) order the property owner to repair it within 30 days, and if not repaired within 30 days, then the city may demolish and charge the property owner; or
- 2) order the property owner to demolish the building within 30 days if it is infeasible to repair, and if not demolished within 30 days, then the city may demolish and charge the property owner.

#### **Action by the Building Board of Appeals.**

- The board must determine whether the building meets the minimum standards outlined in Section 15-49 of City ordinances and thus determine whether the building is substandard.
- If the Board determines that the building meets the City's minimum building standards then the Board will make that determination and no further action should be taken.
- If the Board determines that the building does not meet the City's minimum standards and the owner, lienholder, or mortgagee has not established that the work cannot reasonably be performed within thirty (30) days, then the Board may either"
  - o Order the property owner, lienholder, or mortgagee to repair it within 30 days and if not repaired within 30 days, then the city may demolish and charge the property; or
  - o Order the property owner, lienholder, or mortgagee to demolish the building within 30 days if it is infeasible to repair and if no demolished within 30 days then the city may demolish and charge the property.
- If the Board determines that the building does not meet the City's minimum standards and the owner, lienholder, or mortgagee has established that the work cannot reasonably be performed within thirty (30) days, then the Board may:
  - o Order the property owner to repair it within 90 days and establish specific time schedules for the commencement and performance of the work, and if not repaired within 90 days, then the city may demolish and charge the property; or
  - o Order the property owner to demolish the building within 90 days if it is infeasible to repair and establish specific time schedules for the commencement and performance of the work, and if not demolished within 90 days, then the city may demolish and charge the property.
- The board may not allow the owner, lienholder, or mortgagee more than ninety (90) days to repair, remove or demolish the building or fully perform all work required to comply with the order unless the owner, lienholder, or mortgagee:

- o Submits a detailed plan and time schedule for the work at the hearing; and
- o Establishes at the hearing that the work cannot be reasonably completed within ninety (90) days because of the scope and complexity of the work.

Sample motions are provided below for your reference, please note that you are not required to use one of the sample motions.

#### Approve

I find that the building does not meet the City's minimum building standards and make a motion to order the owner to repair the property within 30 days to avoid demolition by the city and be charged; or

I find that the building does not meet the City's minimum building standards and make a motion to order the owner to demolish within 30 days to avoid demolition by the city and be charged.

#### Deny

I find that the building does not meet the City's minimum building standards and make a motion to deny the request for demolition or repair.

#### **VI. Attachments:**

1. Tarrant Appraisal Owner Information
2. Article II Sec. 15-48; Sec. 15-49; Sec. 15-50
3. Housing Standards Code Checklist
4. Fire Report
5. Water account information with notes
6. List of code violations
7. MyGov information of code violations
8. Copies of letters mailed to all owners of the property & copy of letter mailed out within 200 ft.
9. Pictures of the property taken by the Building Official

Included will be a PowerPoint presentation regarding photographs of the property.

making it convenient for you

Quick Start Center

User ID

Search Website



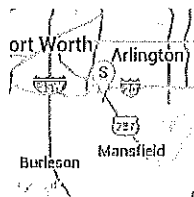
\*\* Commercial ARB Evidence is now Available \*\* Online protests may now be filed \*\*

[View or Print PDF](#)

## Tarrant Appraisal District Real Estate

06/01/2015

Account Number: 01294180  
 Georeference: 18380-5-4  
 Property Location: 1012 HARRISON DR, KENNEDALE, 76060



Owner Information: SCOTT JOHN D  
 SCOTT SHEILA  
 1012 HARRISON ST  
 KENNEDALE TX 76060-5404

1 Prior Owners

Legal Description: HILDALE ADDITION-KENNEDALE  
 Block: 5 Lot: 4  
 Taxing Jurisdictions: 014 CITY OF KENNEDALE  
 220 TARRANT COUNTY  
 914 KENNEDALE ISD  
 224 TARRANT COUNTY HOSPITAL  
 225 TARRANT COUNTY COLLEGE

This information is intended for reference only and is subject to change. It may not accurately reflect the complete status of the account as actually carried in TAD's database

### Proposed Values for Tax Year 2015

|                      | Land     | Impr     | 2015 Total †† |
|----------------------|----------|----------|---------------|
| Market Value         | \$25,000 | \$41,856 | \$66,856      |
| Appraised Value †    | \$25,000 | \$41,856 | \$66,856      |
| Approximate Size ††† |          |          | 1,916         |
| Land Acres           |          |          | 0.2647        |
| Land SqFt            |          |          | 11,529        |

† Appraised value may be less than market value due to state-mandated limitations on value increases

†† A zero value indicates that the property record has not yet been completed for the indicated tax year

††† Rounded

### 5-Year Value History

|                 |          |
|-----------------|----------|
| Tax Year        | 2014     |
| Appraised Land  | \$25,000 |
| Appraised Impr  | \$42,700 |
| Appraised Total | \$67,700 |
| Market Land     | \$25,000 |
| Market Impr     | \$42,700 |
| Market Total    | \$67,700 |
| Tax Year        | 2013     |
| Appraised Land  | \$25,000 |
| Appraised Impr  | \$42,700 |
| Appraised Total | \$67,700 |
| Market Land     | \$25,000 |

## Sec. 15-48. - Enforcement.

(a) *General.*

- (1) *Administration.* The building official is hereby authorized to enforce the provisions of this article. The building official shall have the power to render interpretations of this article and to adopt and enforce rules and supplemental regulations in order to clarify the application of its provisions. Such interpretations, rules and regulations shall be in conformity with the intent and purpose of this article.
  - (2) *Inspections.* The building official and the fire marshal or their designees are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this article.
  - (3) *Right of entry.* When it is necessary to make an inspection to enforce the provisions of this article, or when the building official or his designee has a reasonable cause to believe that there exists in a building or upon a premises a condition which is contrary to or in violation of this article which makes the building or premises unsafe, dangerous, or hazardous, the building official or his designee may enter the building or premises at reasonable times to inspect or perform the duties imposed by this article, provided that if such building or premises be occupied that credentials be presented to the occupant and entry requested. If such building or premises be unoccupied, the building official or his designee shall first make a reasonable effort to locate the owner or other person having charge or control of the building or premises and request entry. If entry is refused, the building official shall have recourse to the remedies provided by law to secure entry.
- (b) *Abatement of dangerous or substandard buildings.* All buildings or portions thereof which are determined after inspection by the building official to be dangerous or substandard as defined by this article are hereby declared to be public nuisances and shall be abated by repair, vacation, demolition, removal or securing in accordance with the procedures specified in this article.
- (c) *Unlawful to violate article.* It shall be unlawful for any person, firm or corporation to erect, construct, or use, occupy or maintain any building or cause or permit the same to be done in violation of this article.
- (d) *Inspection authorized.* All buildings within the scope of this article and all construction or work for which a permit is required shall be subject to inspection by the building official.

(Ord. No. 85, § I, 10-12-95)

## Sec. 15-49. - Substandard buildings declared.

For the purposes of this article, any building, regardless of the date of its construction, which has any or all of the conditions or defects hereinafter described shall be deemed to be a substandard building:

- (1) Any building that is dilapidated, substandard, or unfit for human habitation and a hazard to the public health, safety and welfare.
- (2)

Any building that, regardless of its structural condition, is unoccupied by its owners, lessees or other invitees and is unsecured from unauthorized entry to the extent that it could be entered or used by vagrants or other uninvited persons as a place of harborage or could be entered or used by children.

- (3) Any building that is boarded up, fenced or otherwise secured in any manner if:
  - a. The building constitutes a danger to the public even though secured from entry; or
  - b. The means used to secure the building are inadequate to prevent unauthorized entry or use of the building in the manner described by subsection (2) above.
- (4) Whenever any door, aisle, passageway, stairway or other means of exit is not of sufficient width or size or is not so arranged as to provide safe and adequate means of exit in case of fire or panic.
- (5) Whenever the walking surface of any aisle, passageway, stairway or other means of exit is so warped, worn, loose, torn or otherwise unsafe as to not provide safe and adequate means of exit in case of fire or panic.
- (6) Whenever the stress in any materials, or members or portion thereof, due to all dead and live loads, is more than one and one-half (1½) times the working stress or stresses allowed in the building code for new buildings of similar structure, purpose or location.
- (7) Whenever any portion thereof has been damaged by fire, earthquake, wind flood or by any other cause, to such an extent that the structural strength or stability thereof is materially less than it was before such catastrophe and is less than the minimum requirements of the building code for new buildings of similar structure, purpose or location.
- (8) Whenever any portion or member or appurtenance thereof is likely to fail, or to become detached or dislodged, or to collapse and thereby injure persons or damage property.
- (9) Whenever any portion of a building, or any member, appurtenance or ornamentation on the exterior thereof is not of sufficient strength or stability, or is not so anchored, attached or fastened in place so as to be capable of resisting a wind pressure of one-half of that specified in the building code for new buildings of similar structure, purpose or location without exceeding the working stresses permitted in the building code for such buildings.
- (10) Whenever any portion thereof has wracked, warped, buckled or settled to such an extent that walls or other structural portions have materially less resistance to winds or earthquakes than is required in the case of similar new construction.
- (11) Whenever the building, or any portion thereof, because of (a) dilapidation, deterioration or decay; (b) faulty construction; (c) the removal, movement or instability of any portion of the ground necessary for the purpose of supporting such building; (d) the deterioration, decay or inadequacy of its foundation; or (e) any other cause, is likely to partially or completely collapse.
- (12) Whenever, for any reason, the building, or any portion thereof, is manifestly unsafe for the purpose for which it is being used.
- (13) Whenever the exterior walls or other vertical structural members list, lean or buckle to such an extent that a plumb line passing through the center of gravity does not fall inside the middle one-third of the base.
- (14)

Whenever the building, exclusive of the foundation, shows thirty-three (33) percent or more damage or deterioration of its supporting member or members, or fifty (50) percent or more damage or deterioration of its non-supporting members, enclosing or outside walls or coverings.

- (15) Whenever the building has been so damaged by fire, wind, earthquake, flood or other causes, or has become so dilapidated or deteriorated as to become (a) an attractive nuisance to children; or (b) a harbor for vagrants, criminals or immoral persons.
- (16) Whenever any building has been constructed, exists or is maintained in violation of any specific requirement or prohibition applicable to such building provided by the building regulations of this jurisdiction, as specified in the building code, or of any law or ordinance of this state or jurisdiction relating to the condition, location or structure of buildings.
- (17) Whenever any building which, whether or not erected in accordance with all applicable laws and ordinances, has in any non-supporting part, member or portion less than fifty (50) percent, or in any supporting part, member or portion less than sixty-six (66) percent of the (a) strength, (b) fire-resisting qualities or characteristics, or (c) weather-resisting qualities or characteristics required by law in the case of a newly constructed building of like area, height and occupancy in the same location.
- (18) Whenever a building, used or intended to be used for dwelling purposes, because of inadequate maintenance, dilapidation, decay, damage, faulty construction or arrangement, inadequate light, air or sanitation facilities, or otherwise, is determined by the building official to be unsanitary, unfit for human habitation or in such a condition that is likely to cause sickness or disease for reasons including, but not limited to, the following:
  - a. Lack of, or improper water closet, lavatory, bathtub or shower in a dwelling unit or lodging house.
  - b. Lack of, or improper water closets, lavatories and bathtubs or showers per number of guests in a hotel.
  - c. Lack of, or improper kitchen sink in a dwelling unit.
  - d. Lack of hot and cold running water to plumbing fixtures in a hotel.
  - e. Lack of hot and cold running water to plumbing fixtures in a dwelling unit or lodging house.
  - f. Lack of adequate heating facilities.
  - g. Lack of, or improper operation of, required ventilating equipment.
  - h. Lack of minimum amounts of natural light and ventilation required by this Code.
  - i. Room and space dimensions less than required by this article or the building code.
  - j. Lack of required electrical lighting.
  - k. Dampness of habitable rooms.
  - l. Infestation of insects, vermin or rodents.
  - m. General dilapidation or improper maintenance.
  - n. Lack of connection to required sewage disposal system.
  - o. Damaged connections to a sewage disposal system that results in flow of sewage on the ground.
  - p. Lack of adequate garbage and rubbish storage and removal facilities.

- (19) Whenever any building, because of obsolescence, dilapidated condition, deterioration, damage, inadequate exits, lack of sufficient fire-resistive construction, faulty electric wiring, gas connections or heating apparatus, or other cause, is determined by the fire marshal to be a fire hazard.
- (20) Whenever any building is in such a condition as to make a public nuisance known to the common law or in equity jurisprudence.
- (21) Whenever any portion of a building remains on a site after the demolition or destruction of the building.
- (22) Whenever any building is abandoned so as to constitute such building or portion thereof an attractive nuisance or hazard to the public.
- (23) Any building constructed and still existing in violation of any provision of the building code or Uniform Fire Code to the extent that the life, health or safety of the public or any occupant is endangered.
- (24) Whenever the building is in violation of chapter 4, article IV of this Code.

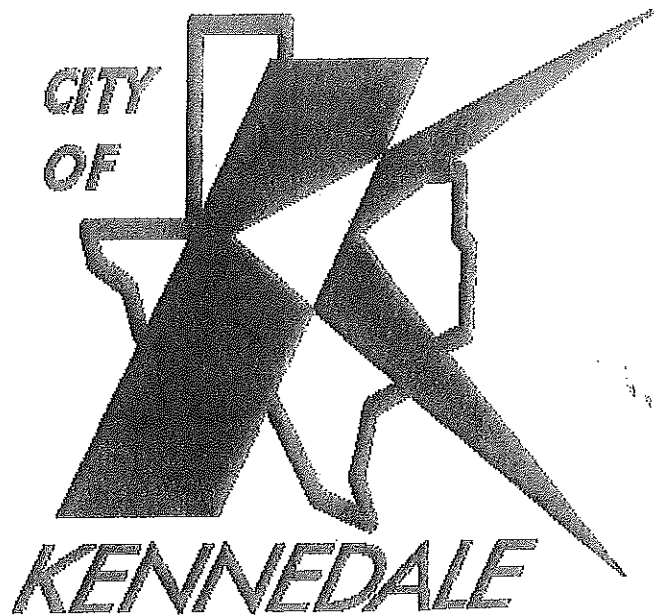
(Ord. No. 85, § I, 10-12-95)

Sec. 15-50. - Determination by building official.

When the building official has inspected or caused to be inspected any building and has found and determined that the building is substandard, the building official may take any or all of the following actions, as he or she deems appropriate:

- (1) Issue notice to the record owner that the building is substandard and must be repaired or demolished; or
- (2) Issue citation(s) for violation(s) of this article; or
- (3) Secure the building if permitted by subsection 15-57(a) below; or
- (4) Recommend to the board that abatement proceedings be commenced pursuant to section 15-51 below.

(Ord. No. 85, § I, 10-12-95)



## HOUSING STANDARDS CODE CHECKLIST

Date: 5-29-2015

Time: 2:00pm

Address: 1012 Harrison, Kennedale, TX. 76060

[The following information is as shown on the Tarrant Appraisal District Property Record.]

Property Owner: John D Scott & Sheila Scott

Owner's Address: 1012 Harrison, Kennedale, TX 76060

Property Description (Legal): Hilldale Addition - Kennedale B1K.5 Lot 4

Does the premises pass inspection? ☐ Yes ☒ No

Sanche Johnson  
Signature of Inspector

5-29-15  
Date of Inspection

- The house is vacant.
- Fire on 1-20-2015

### General Information About Property

|                                                                                                                                                                                                                                                                                                                 | Y                                   | N                                   | NA                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 1. Is this inspection a routine inspection?                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| a. If not, is this inspection the result of a complaint?                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| b. Was this inspection requested by the occupant?                                                                                                                                                                                                                                                               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2. Was entry made onto the property?                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 3. Was entry made into the structure?                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| a. Was the property occupied at the time of the inspection?                                                                                                                                                                                                                                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| i. If no, 3a is Yes. Was entry authorized by a <u>search warrant</u> ?                                                                                                                                                                                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| ii. If no, 3a is Yes. Was the <u>occupant present and gave voluntary consent for this inspection</u> ?                                                                                                                                                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| iii. If no, 3a is Yes. If the occupant was not present; did <u>anyone give voluntary consent</u> for this inspection? (Include the person's name and capacity to give consent in this report)                                                                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| iv. If no, 3a is Yes. If no person has given voluntary consent for this inspection; was this structure <u>open and obviously abandoned</u> by the occupant? <i>Inspected for safety issues.</i>                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| v. If no, 3a is Yes. If no person has given voluntary consent and the structure is not open and obviously abandoned by the occupant; were there <u>exigent circumstances that required a warrantless search</u> of the structure? [Attached a written statement expressing what the exigent circumstances are.] | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

- |                                                                                                                                                                       | Y                                   | N                                   | NA                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 4. Is this property vacant at this time? <i>[That is, is the property open and/or obviously abandoned by the owners and/or occupants.]</i>                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| a. If vacant, are all doors, windows, and other openings secured against unauthorized entry?                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. If vacant, has all combustibles been removed from the premises?                                                                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Are there abandoned refrigerators, freezers, etc. <i>(with doors still attached)</i> that would constitute a life hazard?                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are there any open wells or pits that would constitute a life hazard?                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 7. Are there abandoned vehicle(s) <i>{vehicle without both a current inspection sticker and current license plates}</i> or parts of an abandoned vehicle in the yard? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If so, get the license number and vehicle identification number if possible.                                                                                       |                                     |                                     |                          |
| 8. In addition to the main structure, are there any outbuildings located on this property?                                                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If so, are they included in this report?                                                                                                                           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Were photographs taken at the time of this inspection?                                                                                                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Y N , NA

# GENERAL

1. Is this building dilapidated, substandard, or unfit for human habitation and a hazard to the public health, safety and welfare? 15-49 (1) ☒ ☐ ☐
2. Is this building, regardless of its structural condition, unoccupied by its owners, lessees or other invitees and unsecured from unauthorized entry to the extent that it could be entered or used by vagrants or other uninvited persons as a place of harborage or could be entered or used by children? 15-49 (2) ☒ ☐ ☐
3. If this building is boarded up, fenced or otherwise secured in any manner. If Yes, then: ☐ ☒ ☐
  - a. Does the building constitute a danger to the public even though secured from entry? ☒ ☐ ☐
  - b. Are the means used to secure the building inadequate to prevent unauthorized entry or use of the building in the manner described by Subsection (2) above? 15-49 (3) ☒ ☐ ☐
4. Does this building have a door, aisle, passageway, or stairway or other means of exit that is not of sufficient width or size or is not so arranged as to provide safe and a adequate means of exit in case of fire or panic? 15-49 (4) ☒ ☐ ☐
5. Is the walking surface of any aisle, passageway, stairway or other means of exit warped, worn, loose, torn or otherwise unsafe and does not provide a safe and adequate means of exit in case of fire or panic? 15- 49 (5) ☒ ☐ ☐
6. Is the stress in any materials, or members or portion thereof, due to all dead and live loads, more than one and one-half (1 ½) times the working stress or stresses allowed in the building code for new buildings of similar structure, purpose or location? 15-49 (6) ☐ ☒ ☐

- ✓ N N/A
7. Has any portion thereof been damaged by fire, earthquake, wind flood or by any other cause, to such an extent that the structural strength or stability thereof is materially less than it was before such catastrophe and is less than the minimum requirements of the building code for new buildings of similar structure, purpose or location? 15-49 (7) ☐ ☒ ☐
  8. Is any portion or member or appurtenance thereof likely to fail, or to become detached or dislodged, or to collapse and thereby injure persons or damage property? 15-49 (8) ☐ ☒ ☐
  9. Is any portion of the building, or any member, appurtenance or ornamentation on the exterior thereof not of sufficient strength or stability, or not so anchored, attached or fastened in place so as to be capable of resisting a wind pressure of one-half of that specified in the building code for new buildings of similar structure, purpose or location without exceeding the working stresses permitted in the building code for such buildings? 15-49 (9) ☐ ☒ ☐
  10. Has any portion thereof been wracked, warped, buckled or settled to such an extent that walls or other structural portions have materially less resistance to winds or earthquakes than is required in the case of similar new construction? 15-49 (10) ☐ ☒ ☐
  11. Is the building, or any portion thereof, because of (a) dilapidation, deterioration or decay; (b) faulty construction; (c) the removal, movement or instability of any portion of the ground necessary for the purpose of supporting such building; (d) the deterioration, decay or inadequacy of its foundation; or (e) any other cause, likely to partially or completely collapse? 15-49 (11) ☐ ☒ ☐
  12. Is the building, for any reason, or any portion thereof, manifestly unsafe for the purpose for which it is being used? 15-49 (12) ☒ ☐ ☐
  13. Do the exterior walls or other vertical structural members list, lean or buckle to such an extent that a plumb line passing through the center of gravity does not fall inside the middle one-third of the base? 15-49 (13) ☐ ☒ ☐

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Y                                   | N                                   | N/A                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 14. Does the building, exclusive of the foundation, show thirty-three (33) percent or more damage or deterioration of its supporting member or members, or fifty (50) percent or more damage or deterioration of its non-supporting members, enclosing or outside walls or coverings? 15-49 (14)                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 15. Has the building been damaged by fire, wind, earthquake, flood or other causes, or become so dilapidated or deteriorated as to become (a) an attractive nuisance to children; or (b) a harbor for vagrants, criminals or immoral persons? 15-49 (15)                                                                                                                                                                                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Has this building been constructed, exists or maintained in violation of any specific requirement or prohibition applicable to such building provided by the building regulations of this jurisdiction, as specified in the building code, or of any law or ordinance of this state or jurisdiction relating to the condition, location or structure of buildings? 15-49 (16)                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 17. Does this building, whether or not erected in accordance with all applicable laws and ordinances, have in any non-supporting part, member or portion less than fifty (50) percent, or have in any supporting part, member or portion less than sixty-six (66) percent of the (a) strength, (b) fire-resisting qualities or characteristics, or (c) weather-resisting qualities or characteristics required by law in the case of a newly constructed building of like area, height and occupancy in the same location? 15-49 (17) | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Y                                   | N                        | N/A                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 18. Has this building, used or intended to be used for dwelling purposes, because of inadequate maintenance, dilapidation, decay, damage, faulty construction or arrangement, inadequate light, air or sanitation facilities, or otherwise, been determined by the building official to be unsanitary, unfit for human habitation or in such a condition that is likely to cause sickness or disease for reasons including, but not limited to, the following: 15-49 (18) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| a) Lack of, or improper water closed, lavatory, bathtub or shower in a dwelling unit or lodging house.                                                                                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| b) Lack of, or improper water closets, lavatories and bathtubs or showers per number of guests in a hotel.                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c) Lack of, or improper kitchen sink in a dwelling unit.                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| d) Lack of hot and cold running water to plumbing fixtures in a hotel.                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| e) Lack of hot and cold running water to plumbing fixtures in a dwelling unit or lodging house.                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| f) Lack of adequate heating facilities.                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| g) Lack of, or improper operation of, required ventilating equipment.                                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| h) Lack of minimum amounts of natural light and ventilation required by this Code.                                                                                                                                                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| i) Room and space dimensions less than required by this article or the building code.                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| j) Lack of required electrical lighting.                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| k) Dampness of habitable rooms.                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| l) Infestation of insects, vermin or rodents.                                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| m) General dilapidation or improper maintenance.                                                                                                                                                                                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| n) Lack of connection to required sewage disposal system.                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| o) Damaged connections to a sewage disposal system that results in flow of sewage on the ground.                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| p) Lack of adequate garbage and rubbish storage and removal facilities.                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |

- |     |                                                                                                                                                                                                                                                                                                              | Y                                   | N                                   | N/A                      |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 19. | Has the building, because of obsolescence, dilapidated condition, deterioration, damage, inadequate exits, lack of sufficient fire-resistive construction, faulty electric wiring, gas connections or heating apparatus, or other cause, been determined by the fire marshal to be a fire hazard? 15-49 (19) | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 20. | Is this building in such a condition as to make a public nuisance known to the common law or in equity jurisprudence? 15-49 (20)                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 21. | Does any portion of the building remain on the site after the demolition or destruction of the building? 15-49 (21)                                                                                                                                                                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 22. | If this building is abandoned or any portion thereof, does it constitute an attractive nuisance or hazard to the public? 15-49 (22)                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 23. | Does any of the building constructed and still existing in violation of any provision of the building code or Uniform Fire Code to the extent that the life, health or safety of the public or any occupant is endangered? 15-49 (23)                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

|                                                                |  |                                                                                                                                                                                                                |  |                                                                                                                      |  |                                                |  |
|----------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------|--|
| <b>A</b>                                                       |  | MM DD YYYY                                                                                                                                                                                                     |  | Delete                                                                                                               |  | NFIRS -1                                       |  |
| WB421                                                          |  | TX                                                                                                                                                                                                             |  | 01 20 2015                                                                                                           |  | 1 15-0000057 000                               |  |
| FDID *                                                         |  | State *                                                                                                                                                                                                        |  | Incident Date *                                                                                                      |  | Station Incident Number * Exposure *           |  |
|                                                                |  |                                                                                                                                                                                                                |  |                                                                                                                      |  | No Activity                                    |  |
| <b>B Location*</b>                                             |  | <input type="checkbox"/> 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                                                                                                         |  | 1114 - 04                                      |  |
| <input checked="" type="checkbox"/> Street address             |  | 1012 Harrison                                                                                                                                                                                                  |  | DR                                                                                                                   |  |                                                |  |
| <input type="checkbox"/> Intersection                          |  | Number/Milepost Prefix Street or Highway                                                                                                                                                                       |  | Street Type                                                                                                          |  | Suffix                                         |  |
| <input type="checkbox"/> In front of                           |  | Kennedale                                                                                                                                                                                                      |  | TX                                                                                                                   |  | 76060 -                                        |  |
| <input type="checkbox"/> Rear of                               |  | Apt./Suite/Room City                                                                                                                                                                                           |  | State Zip Code                                                                                                       |  | 108 B                                          |  |
| <input type="checkbox"/> Adjacent to                           |  |                                                                                                                                                                                                                |  |                                                                                                                      |  |                                                |  |
| <input type="checkbox"/> Directions                            |  | Cross street or directions, as applicable                                                                                                                                                                      |  |                                                                                                                      |  | Mapsc                                          |  |
| <b>C Incident Type *</b>                                       |  | <b>E1 Date &amp; Times</b>                                                                                                                                                                                     |  | Midnight is 0000                                                                                                     |  | <b>E2 Shift &amp; Alarms</b>                   |  |
| 118 Trash or rubbish fire,                                     |  | Check boxes if dates are the same as Alarm                                                                                                                                                                     |  | Month Day Year Hr Min Sec                                                                                            |  | Local Option                                   |  |
| Incident Type                                                  |  | Alarm *                                                                                                                                                                                                        |  | 01 20 2015 14:41:14                                                                                                  |  | A 106                                          |  |
| <b>D Aid Given or Received*</b>                                |  | ARRIVAL required, unless canceled or did not arrive                                                                                                                                                            |  |                                                                                                                      |  | Shift or Alarms District Platoon               |  |
| 1 <input type="checkbox"/> Mutual aid received                 |  | <input checked="" type="checkbox"/> Arrival *                                                                                                                                                                  |  | 01 20 2015 14:46:00                                                                                                  |  |                                                |  |
| 2 <input type="checkbox"/> Automatic aid recvd.                |  | CONTROLLED Optional, Except for wildland fires                                                                                                                                                                 |  |                                                                                                                      |  | <b>E3 Special Studies</b>                      |  |
| 3 <input type="checkbox"/> Mutual aid given                    |  | <input type="checkbox"/> Controlled                                                                                                                                                                            |  |                                                                                                                      |  | Local Option                                   |  |
| 4 <input type="checkbox"/> Automatic aid given                 |  | LAST UNIT CLEARED, required except for wildland fires                                                                                                                                                          |  |                                                                                                                      |  |                                                |  |
| 5 <input type="checkbox"/> Other aid given                     |  | Last Unit                                                                                                                                                                                                      |  |                                                                                                                      |  | Special Study ID# Special Study Value          |  |
| N <input checked="" type="checkbox"/> None                     |  | <input checked="" type="checkbox"/> Cleared                                                                                                                                                                    |  | 01 20 2015 15:07:03                                                                                                  |  |                                                |  |
| <b>F Actions Taken *</b>                                       |  | <b>G1 Resources *</b>                                                                                                                                                                                          |  | <b>G2 Estimated Dollar Losses &amp; Values</b>                                                                       |  |                                                |  |
| 11 Extinguishment by fire                                      |  | <input checked="" type="checkbox"/> Check this box and skip this section if an Apparatus or Personnel form is used.                                                                                            |  | LOSSES: Required for all fires if known. Optional for non fires.                                                     |  | None                                           |  |
| Primary Action Taken (1)                                       |  | Apparatus Personnel                                                                                                                                                                                            |  | Property \$                                                                                                          |  | 000 000                                        |  |
| Additional Action Taken (2)                                    |  | Suppression 0002 0005                                                                                                                                                                                          |  | Contents \$                                                                                                          |  | 000 000                                        |  |
| Additional Action Taken (3)                                    |  | EMS                                                                                                                                                                                                            |  | PRE-INCIDENT VALUE: Optional                                                                                         |  |                                                |  |
|                                                                |  | Other                                                                                                                                                                                                          |  | Property \$                                                                                                          |  | 000 000                                        |  |
|                                                                |  | <input type="checkbox"/> Check box if resource counts include aid received resources.                                                                                                                          |  | Contents \$                                                                                                          |  | 000 000                                        |  |
| <b>Completed Modules</b>                                       |  | <b>H1* Casualties</b>                                                                                                                                                                                          |  | <b>H3 Hazardous Materials Release</b>                                                                                |  | <b>I Mixed Use Property</b>                    |  |
| <input type="checkbox"/> Fire-2                                |  | Deaths Injuries                                                                                                                                                                                                |  | N <input type="checkbox"/> None                                                                                      |  | NN <input type="checkbox"/> Not Mixed          |  |
| <input type="checkbox"/> Structure-3                           |  | Fire                                                                                                                                                                                                           |  | 1 <input type="checkbox"/> Natural Gas: slow leak, no evacuation or HazMat actions                                   |  | 10 <input type="checkbox"/> Assembly use       |  |
| <input type="checkbox"/> Civil Fire Cas.-4                     |  | Service                                                                                                                                                                                                        |  | 2 <input type="checkbox"/> Propane gas: <21 lb. tank (as in home BBQ grill)                                          |  | 20 <input type="checkbox"/> Education use      |  |
| <input type="checkbox"/> Fire Serv. Cas.-5                     |  | Civilian                                                                                                                                                                                                       |  | 3 <input type="checkbox"/> Gasoline: vehicle fuel tank or portable container                                         |  | 33 <input type="checkbox"/> Medical use        |  |
| <input type="checkbox"/> EMS-6                                 |  | <b>H2 Detector</b>                                                                                                                                                                                             |  | 4 <input type="checkbox"/> Kerosene: fuel burning equipment or portable storage                                      |  | 40 <input type="checkbox"/> Residential use    |  |
| <input type="checkbox"/> HazMat-7                              |  | Required for Confined Fires.                                                                                                                                                                                   |  | 5 <input type="checkbox"/> Diesel fuel/fuel oil: vehicle fuel tank or portable                                       |  | 51 <input type="checkbox"/> Row of stores      |  |
| <input type="checkbox"/> Wildland Fire-8                       |  | 1 <input type="checkbox"/> Detector alerted occupants                                                                                                                                                          |  | 6 <input type="checkbox"/> Household solvents: home/office spill, cleanup only                                       |  | 53 <input type="checkbox"/> Enclosed mall      |  |
| <input checked="" type="checkbox"/> Apparatus-9                |  | 2 <input checked="" type="checkbox"/> Detector did not alert them                                                                                                                                              |  | 7 <input type="checkbox"/> Motor oil: from engine or portable container                                              |  | 58 <input type="checkbox"/> Bus. & Residential |  |
| <input checked="" type="checkbox"/> Personnel-10               |  | U <input type="checkbox"/> Unknown                                                                                                                                                                             |  | 8 <input type="checkbox"/> Paint: from paint cans totaling < 55 gallons                                              |  | 59 <input type="checkbox"/> Office use         |  |
| <input type="checkbox"/> Arson-11                              |  |                                                                                                                                                                                                                |  | 9 <input type="checkbox"/> Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form |  | 60 <input type="checkbox"/> Industrial use     |  |
| <b>J Property Use*</b>                                         |  | Structures                                                                                                                                                                                                     |  | 341 <input type="checkbox"/> Clinic, clinic type infirmary                                                           |  | 63 <input type="checkbox"/> Military use       |  |
| 131 <input type="checkbox"/> Church, place of worship          |  | 342 <input type="checkbox"/> Doctor/dentist office                                                                                                                                                             |  | 539 <input type="checkbox"/> Household goods, sales, repairs                                                         |  | 65 <input type="checkbox"/> Farm use           |  |
| 161 <input type="checkbox"/> Restaurant or cafeteria           |  | 361 <input type="checkbox"/> Prison or jail, not juvenile                                                                                                                                                      |  | 579 <input type="checkbox"/> Motor vehicle/boat sales/repair                                                         |  | 00 <input type="checkbox"/> Other mixed use    |  |
| 162 <input type="checkbox"/> Bar/Tavern or nightclub           |  | 419 <input checked="" type="checkbox"/> 1-or 2-family dwelling                                                                                                                                                 |  | 571 <input type="checkbox"/> Gas or service station                                                                  |  |                                                |  |
| 213 <input type="checkbox"/> Elementary school or kindergarten |  | 429 <input type="checkbox"/> Multi-family dwelling                                                                                                                                                             |  | 599 <input type="checkbox"/> Business office                                                                         |  |                                                |  |
| 215 <input type="checkbox"/> High school or junior high        |  | 439 <input type="checkbox"/> Rooming/boarding house                                                                                                                                                            |  | 615 <input type="checkbox"/> Electric generating plant                                                               |  |                                                |  |
| 241 <input type="checkbox"/> College, adult education          |  | 449 <input type="checkbox"/> Commercial hotel or motel                                                                                                                                                         |  | 629 <input type="checkbox"/> Laboratory/science lab                                                                  |  |                                                |  |
| 311 <input type="checkbox"/> Care facility for the aged        |  | 459 <input type="checkbox"/> Residential, board and care                                                                                                                                                       |  | 700 <input type="checkbox"/> Manufacturing plant                                                                     |  |                                                |  |
| 331 <input type="checkbox"/> Hospital                          |  | 464 <input type="checkbox"/> Dormitory/barracks                                                                                                                                                                |  | 819 <input type="checkbox"/> Livestock/poultry storage (barn)                                                        |  |                                                |  |
| Outside                                                        |  | 519 <input type="checkbox"/> Food and beverage sales                                                                                                                                                           |  | 882 <input type="checkbox"/> Non-residential parking garage                                                          |  |                                                |  |
| 124 <input type="checkbox"/> Playground or park                |  | 936 <input type="checkbox"/> Vacant lot                                                                                                                                                                        |  | 891 <input type="checkbox"/> Warehouse                                                                               |  |                                                |  |
| 655 <input type="checkbox"/> Crops or orchard                  |  | 938 <input type="checkbox"/> Graded/care for plot of land                                                                                                                                                      |  | 981 <input type="checkbox"/> Construction site                                                                       |  |                                                |  |
| 669 <input type="checkbox"/> Forest (timberland)               |  | 946 <input type="checkbox"/> Lake, river, stream                                                                                                                                                               |  | 984 <input type="checkbox"/> Industrial plant yard                                                                   |  |                                                |  |
| 807 <input type="checkbox"/> Outdoor storage area              |  | 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:                                |  |                                                |  |
| 919 <input type="checkbox"/> Dump or sanitary landfill         |  | 960 <input type="checkbox"/> Other street                                                                                                                                                                      |  | Property Use                                                                                                         |  | 419                                            |  |
| 931 <input type="checkbox"/> Open land or field                |  | 961 <input type="checkbox"/> Highway/divided highway                                                                                                                                                           |  | 1 or 2 family dwelling                                                                                               |  |                                                |  |
|                                                                |  | 962 <input type="checkbox"/> Residential street/driveway                                                                                                                                                       |  |                                                                                                                      |  |                                                |  |

NFIRS-1 Revision 03/11/99

**K1 Person/Entity Involved** ☐ Local Option ☐ Business name (if applicable)  Area Code  Phone Number

☐ Check This Box if same address as incident location. Then skip the three duplicate address lines.

Mr., Ms., Mrs. First Name  MI  Last Name  Suffix

Number  Prefix  Street or Highway  Street Type  Suffix

Post Office Box  Apt./Suite/Room  City

State  Zip Code

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary

**K2 Owner** ☐ Same as person involved? Then check this box and skip The rest of this section. ☐ Local Option ☐ Business name (if Applicable)  Area Code  Phone Number

☐ Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr., Ms., Mrs. First Name  MI  Last Name  Suffix

Number  Prefix  Street or Highway  Street Type  Suffix

Post Office Box  Apt./Suite/Room  City

State  Zip Code

**L Remarks**

Local Option

01/20/2015 04:48:46 PM Cleveland

On 01/20/2015 at 14:41:14 dispatched To 1021 Harrison DR /Kennedale, TX 76060. The location is a 1 or 2 family dwelling. The incident was determined to be a(n) Trash or rubbish fire, contained.

14:46:00 arrived on scene.

The following actions were performed on scene:

Extinguishment by fire service personnel

Units responding were:

Unit E59 responded.

Unit M59 responded.

E59 arrived to find smoke coming from the chimney of an abandoned house. Kennedale Police Officers had cleared the house and we found a trash fire in the fire place. Fire was extinguished with a water can.

15:07:03 all units back in service.

**L Authorization**

|                      |                     |                  |            |       |     |      |
|----------------------|---------------------|------------------|------------|-------|-----|------|
| 1163                 | Cleveland, Andrew D | LT               | E59        | 01    | 20  | 2015 |
| Officer in charge ID | Signature           | Position or rank | Assignment | Month | Day | Year |

|                                                                                                     |      |                     |                  |            |       |     |      |
|-----------------------------------------------------------------------------------------------------|------|---------------------|------------------|------------|-------|-----|------|
| Check Box if same as Officer Member making report ID in charge. <input checked="" type="checkbox"/> | 1163 | Cleveland, Andrew D | LT               | E59        | 01    | 20  | 2015 |
|                                                                                                     |      | Signature           | Position or rank | Assignment | Month | Day | Year |

|        |         |    |    |      |         |                   |            |                       |
|--------|---------|----|----|------|---------|-------------------|------------|-----------------------|
| WB421  | TX      | MM | DD | YYYY | 1       | 15-0000057        | 000        | Complete<br>Narrative |
| FDID * | State * | 1  | 20 | 2015 | Station | Incident Number * | Exposure * |                       |

Narrative:

01/20/2015 04:48:46 PM Cleveland

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## City of Kennedale: Administrators

[Dashboard](#) | [Manage Customer](#) | [Daily Cash](#) | [Daily Transaction Report](#) | [Logout](#)

## Find User

Search for user from the following fields. Click Search to start.

Customer - Account Number

Last Name

First Name

Street Address

Meter Number

1012 harrison

Search

No Accounts Found

ubtwei : 192.1.1.142  
krountreeThu Jun-04-2015 08:37:20 am  
Work Order Inquirystw<sup>INC</sup>  
© 2015

| Maintenance Hist              |                  | Print Order                                                                                                                               |                 |                   |
|-------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------|
| Account                       | 019-0000720-001  | Name                                                                                                                                      | SCOTT, JOHN DAN |                   |
| Address                       | 1012 HARRISON DR |                                                                                                                                           | Status          | I                 |
| Page 1                        | Page 2           | Comments                                                                                                                                  | RE-Read         | Units/Hours/Emp's |
| Work order group code         |                  | U UTILITY BILLING                                                                                                                         |                 |                   |
| Department assigned to        |                  |                                                                                                                                           |                 |                   |
| Person assigned to            |                  | CHRIS Y                                                                                                                                   |                 |                   |
| Userid to complete work order |                  |                                                                                                                                           |                 |                   |
| Instructions                  |                  | please read, and check that meter is working correct.<br>the reading for this customer has contened to drop over<br>the last 5 months. vm |                 |                   |
| Date modified                 |                  | 03/22/2004                                                                                                                                |                 |                   |
| Userid modified               |                  | VALENCIA                                                                                                                                  |                 |                   |
| Userid created                |                  | VALENCIA                                                                                                                                  |                 |                   |

ubtwoi : 192.1.1.142  
hrountreeThu Jun-04-2015 08:38:04 am  
Work Order Inquirystw  
INC  
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| Maintenance Hist |                 | Print Order                                   |                 |          |                  |         |   |                   |  |
|------------------|-----------------|-----------------------------------------------|-----------------|----------|------------------|---------|---|-------------------|--|
| Account          | 019-0000720-001 | Name                                          | SCOTT, JOHN DAN | Address  | 1012 HARRISON DR | Status  | I |                   |  |
| Page 1           |                 | Page 2                                        |                 | Comments |                  | RE-Read |   | Units/Hours/Emp#s |  |
| Date completed   |                 | 09/03/2004                                    |                 |          |                  |         |   |                   |  |
| Completed by     |                 | VALENCIA                                      |                 |          |                  |         |   |                   |  |
| Field comments   |                 | WATER ON, CUST HOME. READING 23095. 090304 VM |                 |          |                  |         |   |                   |  |



ubtwei : 192.1.1.142  
krountreeThu Jun-04-2015 08:38:22 am  
Work Order Inquirystw  
INC  
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|                  |                 |                                                                                                                                                                    |                 |          |                  |         |   |                   |  |
|------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------|------------------|---------|---|-------------------|--|
| Maintenance Hist |                 | Print Order                                                                                                                                                        |                 |          |                  |         |   |                   |  |
| Account          | 019-0000720-001 | Name                                                                                                                                                               | SCOTT, JOHN DAN | Address  | 1012 HARRISON DR | Status  | I |                   |  |
| Page 1           |                 | Page 2                                                                                                                                                             |                 | Comments |                  | RE-Read |   | Units/Hours/Emp's |  |
| Date completed   |                 | 09/29/2004                                                                                                                                                         |                 |          |                  |         |   |                   |  |
| Completed by     |                 | JULIEG                                                                                                                                                             |                 |          |                  |         |   |                   |  |
| Field comments   |                 | <p>Went to door, nobody was home and water running 9/28.<br/>Cust came back in and Justin went back to her home with<br/>her to turn water on. 9/28 JG 9/28/04</p> |                 |          |                  |         |   |                   |  |

ubtwei : 192.1.1.142  
krountreeThu Jun-04-2015 08:38:41 am  
Work Order Inquirystw<sup>INC</sup>  
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| Maintenance Hist |                 | Print Order                           |                 |          |                  |            |   |                   |  |
|------------------|-----------------|---------------------------------------|-----------------|----------|------------------|------------|---|-------------------|--|
| Account          | 019-0000720-001 | Name                                  | SCOTT, JOHN DAN | Address  | 1012 HARRISON DR | Status     | I |                   |  |
| Page 1           |                 | Page 2                                |                 | Comments |                  | Final Read |   | Units/Hours/Emp#s |  |
| Date completed   |                 | 10/04/2004                            |                 |          |                  |            |   |                   |  |
| Completed by     |                 | JULIEG                                |                 |          |                  |            |   |                   |  |
| Field comments   |                 | Water was already off 9/30 JG 10/4/04 |                 |          |                  |            |   |                   |  |



ubtwei : 192.1.1.142  
krountreeThu Jun-04-2015 08:38:54 am  
Work Order Inquirystw<sub>INC</sub>

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| Maintenance Hist              |                  | Print Order                                                                                            |                 |          |         |                   |                 |
|-------------------------------|------------------|--------------------------------------------------------------------------------------------------------|-----------------|----------|---------|-------------------|-----------------|
| Account                       | 019-0000720-001  | Name                                                                                                   | SCOTT, JOHN DAN |          |         |                   |                 |
| Address                       | 1012 HARRISON DR |                                                                                                        | Status          | I        |         |                   |                 |
| Page 1                        |                  | Page 2                                                                                                 |                 | Comments | RE-Read | Units/Hours/Emp's |                 |
| Work order group code         |                  | U                                                                                                      |                 |          |         |                   | UTILITY BILLING |
| Department assigned to        |                  |                                                                                                        |                 |          |         |                   |                 |
| Person assigned to            |                  | CHRIS Y                                                                                                |                 |          |         |                   |                 |
| Userid to complete work order |                  |                                                                                                        |                 |          |         |                   |                 |
| Instructions                  |                  | Please reread meter and check for leak. Cons is very high. Leave door hanger with findings. Thanks, jg |                 |          |         |                   |                 |
| Date modified                 |                  | 12/22/2004                                                                                             |                 |          |         |                   |                 |
| Userid modified               |                  | LPOLK                                                                                                  |                 |          |         |                   |                 |
| Userid created                |                  | JULIEG                                                                                                 |                 |          |         |                   |                 |



ubtwoi : 192.1.1.142  
krountreeThu Jun-04-2015 08:39:09 am  
Work Order Inquirystw<sub>INC</sub>

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| Maintenance Hist              |                  | Print Order                                   |                 |          |         |                    |
|-------------------------------|------------------|-----------------------------------------------|-----------------|----------|---------|--------------------|
| Account                       | 019-0000720-001  | Name                                          | SCOTT, JOHN DAN |          |         |                    |
| Address                       | 1012 HARRISON DR |                                               | Status          | I        |         |                    |
| Page 1                        |                  | Page 2                                        |                 | Comments | RE-Read | Units/Hours/Empl's |
| Work order group code         |                  | U UTILITY BILLING                             |                 |          |         |                    |
| Department assigned to        |                  |                                               |                 |          |         |                    |
| Person assigned to            |                  | CHRIS Y                                       |                 |          |         |                    |
| Userid to complete work order |                  |                                               |                 |          |         |                    |
| Instructions                  |                  | PLEASE LOCK METER DUE TO UNPAID NSF CHECK. CC |                 |          |         |                    |
| Date modified                 |                  | 06/16/2005                                    |                 |          |         |                    |
| Userid modified               |                  | CROSS                                         |                 |          |         |                    |
| Userid created                |                  | CR                                            |                 |          |         |                    |

ubtwei : 192.1.1.142  
lkrountreeThu Jun-04-2015 08:39:31 am  
Work Order Inquirystw  
INC

© 2015

| Maintenance Hist              |                  | Print Order                                             |                 |          |         |                   |                 |
|-------------------------------|------------------|---------------------------------------------------------|-----------------|----------|---------|-------------------|-----------------|
| Account                       | 019-0000720-001  | Name                                                    | SCOTT, JOHN DAN |          |         |                   |                 |
| Address                       | 1012 HARRISON DR |                                                         | Status          | I        |         |                   |                 |
| Page 1                        |                  | Page 2                                                  |                 | Comments | RE-Read | Units/Hours/Emp's |                 |
| Work order group code         |                  | U                                                       |                 |          |         |                   | UTILITY BILLING |
| Department assigned to        |                  |                                                         |                 |          |         |                   |                 |
| Person assigned to            |                  | CHRIS Y                                                 |                 |          |         |                   |                 |
| Userid to complete work order |                  |                                                         |                 |          |         |                   |                 |
| Instructions                  |                  | PLEASE RECONNECT SERVICE - NSF CHECK & FEES ARE PAID CC |                 |          |         |                   |                 |
| Date modified                 |                  | 06/15/2005                                              |                 |          |         |                   |                 |
| Userid modified               |                  | JULIEG                                                  |                 |          |         |                   |                 |
| Userid created                |                  | CR                                                      |                 |          |         |                   |                 |



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krountreeThu Jun-04-2015 08:39:54 am  
Work Order Inquirystw<sub>INC</sub>  
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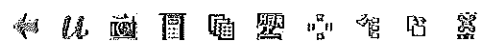
| Maintenance Hist              |                  | Print Order                             |                 |          |         |                    |
|-------------------------------|------------------|-----------------------------------------|-----------------|----------|---------|--------------------|
| Account                       | 019-0000720-001  | Name                                    | SCOTT, JOHN DAN |          |         |                    |
| Address                       | 1012 HARRISON DR |                                         | Status          | I        |         |                    |
| Page 1                        |                  | Page 2                                  |                 | Comments | RE-Read | Units/Hours/Empl's |
| Work order group code         |                  | U UTILITY BILLING                       |                 |          |         |                    |
| Department assigned to        |                  |                                         |                 |          |         |                    |
| Person assigned to            |                  | CHRIS Y                                 |                 |          |         |                    |
| Userid to complete work order |                  |                                         |                 |          |         |                    |
| Instructions                  |                  | REPORT OF LEAK ON CITY SIDE OF METER CC |                 |          |         |                    |
| Date modified                 |                  | 05/11/2006                              |                 |          |         |                    |
| Userid modified               |                  | AMASON                                  |                 |          |         |                    |
| Userid created                |                  | CROSS                                   |                 |          |         |                    |



ubtvoi : 192.1.1.142  
krountreeThu Jun-04-2015 08:40:25 am  
Work Order Inquirystw<sub>INC</sub>

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| Maintenance Hist              |                  | Print Order                                                                                      |                 |          |            |                   |                 |
|-------------------------------|------------------|--------------------------------------------------------------------------------------------------|-----------------|----------|------------|-------------------|-----------------|
| Account                       | 019-0000720-001  | Name                                                                                             | SCOTT, JOHN DAN |          |            |                   |                 |
| Address                       | 1012 HARRISON DR |                                                                                                  | Status          | I        |            |                   |                 |
| Page 1                        |                  | Page 2                                                                                           |                 | Comments | Final Read | Units/Hours/Emp's |                 |
| Work order group code         |                  | U                                                                                                |                 |          |            |                   | UTILITY BILLING |
| Department assigned to        |                  |                                                                                                  |                 |          |            |                   |                 |
| Person assigned to            |                  | CHRIS Y                                                                                          |                 |          |            |                   |                 |
| Userid to complete work order |                  |                                                                                                  |                 |          |            |                   |                 |
| Instructions                  |                  | PLEASE GET FINAL READING & MAKE SURE WATER IS STILL OFF. NO PMT FOR 3 MONTHS, NO WATER USAGE. CC |                 |          |            |                   |                 |
| Date modified                 |                  | 10/06/2010                                                                                       |                 |          |            |                   |                 |
| Userid modified               |                  | aowens                                                                                           |                 |          |            |                   |                 |
| Userid created                |                  | cross                                                                                            |                 |          |            |                   |                 |



## **History of Violations at address: 1012 Harrison St. Kennedale, TX 76060.**

**09/18/2008** – Inspection was made and recorded of High Grass, Weeds, and brush on property. Letter was mailed out. Case closed on October 14, 2008 with voluntary compliance with two inspections.

**04/29/2009** – Inspection was made and recorded of High grass and weeds needing to be mowed. Letter was mailed out. Case closed on May 11, 2009 with voluntary compliance with two inspections.

**09/21/2010** – Inspection was made and recorded of High grass and weeds needing to be mowed. Letter was mailed out. Case closed on October 22, 2010 with forced compliance with one inspection. Hired contractor to mow property and open lien with remaining balance of \$155.00 due since November 12, 2010.

**09/24/2010** – Inspection was made and recorded that the structure located at this location does not meet current building codes. Case is still currently open. Notes on the case state, "Spoke with Mike ##### with Safe Guard Properties about having the structure demo. He is going to update CitiMortgage and get back to me with their ideas on demo'g the house."

**03/29/2012** – Inspection was made and recorded of tall grass and weeds needing to be mowed. Letter was mailed out. Case closed on May 4, 2012 with forced compliance with one inspection. Hired contractor to mow property and open lien with remaining balance of \$155.00 due since June 3, 2012.

**09/04/2012** – Inspection was made and recorded of tall grass and weeds needing to be mowed. Letter was mailed out. Case closed on November 9, 2012 with forced compliance with one inspection. Hired contractor to mow property and open lien with remaining balance of \$155.00 due since November 2, 2012.

**05/21/2013** – Inspection was made and recorded of tall grass and weeds needing to be mowed. Letter was mailed out. Case closed on June 24, 2013 with forced compliance with two inspections. Hired contractor to mow property and open lien with remaining balance of \$135.00 due since June 21, 2013.

**11/21/2014** – Inspection was made and recorded that the property needs to be secured by boarding up the doors and windows. Letter was mailed out. Case closed on January 30, 2015 with voluntary compliance with one inspection.



City of Kennedale

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**NUI : High Grass and Weeds**► **Overviews:** Results | Documents | Inspections

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 10-00355 | Sep 21, 2010 | 76d 2h            |

**Case Description**

High grass and weeds needs to be mowed

**This Case has been archived!**

Date Closed: Oct 22, 2010 by Glenn Greenwood

Closing Status: Closed - Violation - Forced Compliance

**Address** (show more)1012 Harrison  
Kennedale, TX 76060**CE History**

(display 4 records) (property history)

**Key Dates and Information** (edit)

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 09/21/2010 |
| Total # of Inspections  | 1          |
| Total # of Publish      | 0          |
| Abatement Date          | 10/12/2010 |

**Fees and Invoices**

(edit fees &amp; invoices)

| Fee            | Amount  | Paid   | Remaining |
|----------------|---------|--------|-----------|
| Administrative | \$75.00 | \$0.00 | \$75.00   |
| Contractor     | \$80.00 | \$0.00 | \$80.00   |

Amount Overdue: \$155.00

Due Date: Nov 12, 2010

**Case Notes**

► Add Note ► Set up Standard Notes

There are no case notes.

[Back](#)**STEPS**

Inspector: Glenn Greenwood

Initial Inspection

Violation

Notice Letter

Notice Mailed

Reinspection

Ready

Call Contractor

Contractor Called

Add City Fees

Fees Charged

Invoice Property Owner

Owner Invoice Sent

Payment Due

Ready

File Lien

Case Closed

Oct 22, 2010

**Documents**

- Notification Letter
- Violation Notice
- Owners' Invoice
- Lien

Katherine Rountree

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April 1, 2015

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## NUI : High Grass and Weeds

► **Overviews:** Results | Inspections

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 09-00196 | Apr 29, 2009 | 8d 1h             |

**Case Description**

High grass and weeds need to be mowed

**This Case has been archived!**

Date Closed: May 11, 2009 by Glenn Greenwood

Closing Status: Closed - Violation - Voluntary Compliance

**Address (show more)**1012 Harrison  
Kennedale, TX 76060**Key Dates and Information (edit)**

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 04/29/2009 |
| Last Inspection Date    | 05/11/2009 |
| Total # of Inspections  | 2          |
| Total # of Publish      | 0          |
| Abatement Date          | 05/11/2009 |

**STEPS**

Inspector: Glenn Greenwood

Initial Inspection

Violation

Notice Letter

Ready

Reinspection

Completed

Call Contractor

Add City Fees

Invoice Property Owner

Payment Due

File Lien

Case Closed

May 11, 2009

**Documents**

- Notification Letter
- Violation Notice
- Owners' Invoice
- Lien

**Case Notes**

► Add Note ► Set up Standard Notes

► Contact number

Owners son at [REDACTED]

Added by Glenn Greenwood on May 1, 2009

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**NUI : High Grass and Weeds**► **Overviews:** Results | Documents | Inspections

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 08-00019 | Sep 18, 2008 | 17d 18h           |

**Case Description**

High Grass, Weeds and Brush on Property

**This Case has been archived!**

Date Closed: Oct 14, 2008 by Glenn Greenwood

Closing Status: Closed - Violation - Voluntary Compliance

**Address** (show more) 1012 Harrison  
Kennedale, TX 76060**Key Dates and Information** (edit)

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 09/29/2008 |
| Last Inspection Date    | 10/14/2008 |
| Total # of Inspections  | 2          |
| Total # of Publish      | 0          |
| Abatement Date          | 10/14/2008 |

**STEPS****Inspector:** Glenn Greenwood

Initial Inspection

Violation

Notice Letter

Notice Mailed

Reinspection

Completed

Call Contractor

Add City Fees

Invoice Property Owner

Payment Due

File Lien

Case Closed

Oct 14, 2008

**Documents**

- Notification Letter
- Violation Notice
- Owners' Invoice
- Lien

**Case Notes**

► Add Note ► Set up Standard Notes

There are no case notes.

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**NUI : High Grass and Weeds**► **Overviews:** Results | Documents | Inspections

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 13-00169 | May 21, 2013 | 23d 1h            |

**Case Description**

Tall weeds and grass needs to be mowed

**This Case has been archived!**

Date Closed: Jun 24, 2013 by Glenn Greenwood

Closing Status: Closed - Violation - Forced Compliance

**Address (show more)**1012 Harrison  
Kennedale, TX 76060**CE History**

(display 4 records) (property history)

**Key Dates and Information (edit)**

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 05/21/2013 |
| Last Inspection Date    | 05/21/2013 |
| Total # of Inspections  | 2          |
| Total # of Publish      | 0          |
| Abatement Date          | 05/21/2013 |

**Assigned Contractor**

W. Two Plus, Inc. (Edit)

**Fees and Invoices (edit fees & invoices)**

| Fee            | Amount  | Paid   | Remaining |
|----------------|---------|--------|-----------|
| Administrative | \$75.00 | \$0.00 | \$75.00   |
| Contractor     | \$60.00 | \$0.00 | \$60.00   |

Amount Overdue: \$135.00

Due Date: Jun 21, 2013

**Case Notes**

► Add Note ► Set up Standard Notes

There are no case notes.

[Back](#)**STEPS**

Inspector: Glenn Greenwood

**Initial Inspection**

Violation

Notice Letter

Ready

Reinspection

Abate

Call Contractor

Contractor Called

Add City Fees

Fees Charged

Invoice Property Owner

Owner Invoice Sent

Payment Due

Action for Non Payment

File Lien

Lien Filed

Case Closed

Jun 24, 2013

**Documents**

- Notification Letter
- Violation Notice
- Owners' Invoice
- Lien



City of Kennedale

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**NUI : High Grass and Weeds**► **Overviews:** Results | Documents | Inspections

| ID#      | Start Date  | Work Days Elapsed |
|----------|-------------|-------------------|
| 12-00355 | Sep 4, 2012 | 47d 19h           |

**Case Description**

Tall grass and weeds needs to be mowed

**This Case has been archived!**

Date Closed: Nov 9, 2012 by Glenn Greenwood

Closing Status: Closed - Violation - Forced Compliance

**Address** (show more) 1012 Harrison  
Kennedale, TX 76060**CE History** (display 4 records) (property history)**Key Dates and Information** (edit)

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 09/04/2012 |
| Total # of Inspections  | 1          |
| Total # of Publish      | 0          |
| Abatement Date          | 10/02/2012 |
| Lien Invoice Date       | 11/02/2012 |

**Assigned Contractor**

W. Two Plus, Inc. (Edit)

**Fees and Invoices** (edit fees & invoices)

| Fee            | Amount  | Paid   | Remaining |
|----------------|---------|--------|-----------|
| Administrative | \$75.00 | \$0.00 | \$75.00   |
| Invoice #11210 | \$40.00 | \$0.00 | \$40.00   |

Amount Overdue: \$115.00

Due Date: Nov 2, 2012

**Case Notes**

► Add Note ► Set up Standard Notes

There are no case notes.

[Back](#)**STEPS****Inspector:** Glenn Greenwood

Initial Inspection

Violation

Notice Letter

Ready

Reinspection

Call Contractor

Contractor Called

Add City Fees

Fees Charged

Invoice Property Owner

Owner Invoice Sent

Payment Due

Action for Non Payment

File Lien

Ready

Case Closed

Nov 9, 2012

**Documents**

- Notification Letter
- Violation Notice
- Owners' Invoice
- Lien



City of Kennedale

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## NUI : High Grass and Weeds



► **Overviews:** Results | Documents | Inspections

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 12-00143 | Mar 29, 2012 | 46d 3h            |

### Case Description

Tall grass and weeds needs to be mowed

**This Case has been archived!**

Date Closed: May 4, 2012 by Glenn Greenwood

Closing Status: Closed - Violation - Forced Compliance

### Address (show more)

1012 Harrison  
Kennedale, TX 76060

### CE History

(display 4 records) (property history)

### Key Dates and Information (edit)

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 03/29/2012 |
| Total # of Inspections  | 1          |
| Total # of Publish      | 0          |
| Abatement Date          | 05/03/2012 |

### Assigned Contractor

W. Two Plus, Inc. (Edit)

### Fees and Invoices

(edit fees & invoices)

| Fee            | Amount  | Paid   | Remaining |
|----------------|---------|--------|-----------|
| Administrative | \$75.00 | \$0.00 | \$75.00   |
| Contractor     | \$40.00 | \$0.00 | \$40.00   |

Amount Overdue: \$115.00

Due Date: Jun 3, 2012

### Case Notes

► Add Note ► Set up Standard Notes

► Mowing lien

Mowing lien filed 6-4-12

### STEPS



Inspector: Glenn Greenwood

Initial Inspection

Violation

Notice Letter

Notice Mailed

Reinspection

Ready

Call Contractor

Add City Fees

Fees Charged

Invoice Property Owner

Owner Invoice Sent

Payment Due

Ready

File Lien

Ready

Case Closed

May 4, 2012

### Documents

- Notification Letter
- Violation Notice
- Owners' Invoice
- Lien

Added by Glenn Greenwood on Jun 4, 2012



City of Kennedale

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## NUI : Nuisances- Substandard Buildings

► [Overviews](#): [Results](#) | [Documents](#) | [Inspections](#)

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 10-00359 | Sep 24, 2010 | 1153d 20h         |



### Case Description (edit)

The structure at this location does not meet current building codes

[Address \(edit\)](#) [\(view\)](#) [\(show more\)](#)1012 Harrison  
Kennedale, TX 76060[CE History](#) (display 4 records) (property history)

### Key Dates and Information (edit)

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 09/24/2010 |
| Total # of Inspections  | 1          |
| Total # of Publish      | 0          |

### STEPS



Inspector: Glenn Greenwood

Initial Inspection

Violation



Notice Letter

Ready



Reinspection

Archive Case

### Modules

► [Enter Location Information](#)

### Documents

► [Notification Letter](#)

### Case Notes

► [Add Note](#) ► [Set up Standard Notes](#)

#### ► Update to cleaning property

Added by Glenn Greenwood on Apr 11, 2011

[\(edit\)](#) [\(delete\)](#)

Jessica @ [REDACTED] for mowing and cleaning.

#### ► Update to property

Added by Glenn Greenwood on Apr 26, 2011

[\(edit\)](#) [\(delete\)](#)Spoke with a lady at [REDACTED] about mowing this property.  
They will have the property mowed approx every 2 weeks.

#### ► Update to property

Added by Glenn Greenwood on Oct 7, 2011

[\(edit\)](#) [\(delete\)](#)

Spoke with Mike Hamm with Safe Guard Properties [REDACTED] about having the structure demo. He is going to update Citimortgage and get back to me with their ideas on demo'g the house.

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Katherine Rountree

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April 1, 2015

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## NUI : Nuisances- Substandard Buildings

[► Overviews:](#) [Results](#) | [Documents](#) | [Inspections](#)

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 14-00236 | Nov 21, 2014 | 46d 19h           |

### Case Description

Property needs to be secured by boarding up the doors and windows

### This Case has been archived!

Date Closed: Jan 30, 2015 by Katherine Rountree

Closing Status: Closed - Violation - Voluntary Compliance

### Address (show more)

1012 Harrison Dr.  
Kennedale, TX 76060

### Key Dates and Information (edit)

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 01/30/2015 |
| Total # of Inspections  | 1          |
| Total # of Publish      | 0          |
| Abatement Date          | 01/30/2015 |

### STEPS

Initial Inspection

Ready

Notice Letter

Notice Mailed

Reinspection

Completed

Case Closed

Jan 30, 2015

### Documents

[► Notification Letter](#)

Inspector: Charles Comeaux

### Case Notes

[► Add Note](#) [► Set up Standard Notes](#)

There are no case notes.

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Katherine Rountree

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April 1, 2015

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City of Kennedale

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## NUI : Nuisances- Substandard Buildings

► **Overviews:** Results | Documents | Inspections

| ID#      | Start Date   | Work Days Elapsed |
|----------|--------------|-------------------|
| 10-00359 | Sep 24, 2010 | 1149d 16h         |

**Case Description (edit)**

The structure at this location does not meet current building codes

**Address (edit) (view) (show more)**1012 Harrison  
Kennedale, TX 76060**CE History**

(display 4 records) (property history)

**Key Dates and Information (edit)**

|                         |            |
|-------------------------|------------|
| Initial Inspection Date | 09/24/2010 |
| Total # of Inspections  | 1          |
| Total # of Publish      | 0          |

**STEPS**

Inspector: Glenn Greenwood

**Initial Inspection**

Violation

Notice Letter

Ready

Reinspection

Archive Case

**Modules**

► Enter Location Information

**Documents**

► Notification Letter

**Case Notes**

► Add Note ► Set up Standard Notes

► **Update to cleaning property**

Added by Glenn Greenwood on Apr 11, 2011

(edit) (delete)

Jessica @ [REDACTED] for mowing and cleaning.

► **Update to property**

Added by Glenn Greenwood on Apr 26, 2011

(edit) (delete)

Spoke with a lady at [REDACTED] about mowing this property.  
They will have the property mowed approx every 2 weeks.► **Update to property**

Added by Glenn Greenwood on Oct 7, 2011

(edit) (delete)

Spoke with Mike Hamm with Safe Guard Properties [REDACTED] about having the structure demo. He is going to update Citimortgage and get back to me with their ideas on demo'g the house.

**Back**

Sandra Johnson

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March 26, 2015

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June 7, 2015

ID #: 10-00017

John D & Sheila Scott  
1012 Harrison St  
Kennedale, TX 76060-5404

**Re: Nuisances- Substandard Buildings at 1012 Harrison  
St Hilldale Addition Blk 5 Lot 4**

Dear John D & Sheila Scott:

An inspection of the above referenced property was made on May 27, 2015. As a result of this inspection, the condition described below was observed:

**Condition:** *Structures at this location do not meet current building codes*

The condition described above is in violation of Section 15-49 of the Kennedale Code of Ordinances, which states, any building having any of the conditions or defects described in the ordinance shall be deemed to be substandard. Any building that is dilapidated or unfit for human habitation. Any building that, regardless of its structural condition, is unoccupied and is unsecured from unauthorized entry. Any building that is boarded up or otherwise secured in any manner that: (a) The building constitutes a danger to the public; or (b) The means used to secure the building is inadequate to prevent unauthorized entry.

**This is your official notice that you will need to bring the property into compliance by obtaining a permit and making necessary repairs to the structure to ensure compliance with current building codes or removal and disposal of the structure. Failure to do so could result in further action by the City of Kennedale.**

The City may issue citations for each day the violation exists and or seek demolition of the property through the Building Board of Appeals and place a lien on the property for the expenses to do so.

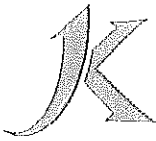
Should you have any questions concerning this matter, please contact me at (817) 985-2134.

Sincerely,

Charles Comeaux  
Code Compliance Officer

RECIPIENTS: John D & Sheila Scott (Owner)

Certified Mail # 7002 2030 0006 9735 4129



**KENNEDALE**  
Development Services  
www.cityofkennedale.com

06/19/2015

John D & Sheila Scott  
1012 Harrison Drive  
Kennedale, TX 76060

**Case BBA # 15-01 – Hilldale Addition – Kennedale, Blk 5 Lot 4 904 1012 Harrison Dr. Kennedale, TX 76060.**

Dear John D & Sheila Scott,

In an effort to enhance safety and beauty of the City of Kennedale through code compliance, the City is enforcing Article II, Dangerous and Substandard Building Ordinance.

The Building Official of the City of Kennedale performed an inspection of the above referenced property and in accordance with Article II, Sec. 15-50; the following measures can be taken.

- (1) Issue notice to the record owner that the building is substandard and must be repaired or demolished; or**
- (2) Issue citation(s) for violation(s) of this article; or**
- (3) Secure the building if permitted by subsection 15-57 9a); or**
- (4) Recommend to the board that the abatement proceedings be commenced pursuant to section 15-51.**

**The city is recommending a public hearing for abatement of the substandard buildings.**

The building(s) located on the above referenced property have been determined to be substandard and/or dangerous. A copy of the House standards Code Checklist for the above referenced property may be obtained at City Hall as well as a copy of the Ordinance.

A public hearing will be held at 405 Municipal Drive (City Hall, City Council Chambers), Kennedale, Texas 76060, on **Tuesday July 7<sup>th</sup>, 2015 at 7:00 PM**. The City of Kennedale Building Board of Appeals will determine whether the building complies with the standards set forth in Article II, Dangerous and Substandard Buildings Ordinance. Although a public hearing will be conducted regarding your property, you are not exempt from any of the items listed above. Therefore each day your property is in violation of the ordinance is considered a separate offense and can receive citations as such.

At the public hearing, you will be required to submit proof of the scope of any work that may be required in an effort to comply with Article II, Dangerous and Substandard Building Ordinance. If the building(s) are found to be in violation of the above referenced Article, the Building Board of Appeals may order the building(s) to be vacated, secured, repaired, removed, or demolished within a reasonable amount of time.



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Development Services  
[www.cityofkennedale.com](http://www.cityofkennedale.com)

If you have any questions concerning this matter, you may contact me at our offices at 405 Municipal Dr, Kennedale, TX 76060 or by phone at 817-985-2132.

Sincerely,

*Sandra Johnson*

Sandra Johnson  
Building Official  
City of Kennedale  
817-538-7359 (cell)  
817-985-2132 (office)

Cc: Members, Kennedale Building Board of Appeals File

Certified Mail # 7002 - 2030 - 0006 - 9735 - 3948

7002 2030 0006 9735 3948

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| John & Sheila Scott                                                       |    |
| Street, Apt. No.,<br>or PO Box No. 1012 Harrison Dr.                      |    |
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| <small>PS Form 3800, June 2002</small>                                    |    |



**KENNEDALE**  
Planning Department  
[www.cityofkennedale.com](http://www.cityofkennedale.com)

**EXAMPLE**

Name  
Address  
City, State, Zip

Dear Owner Name,

This letter is to notify you that the Kennedale Building Board of Appeals will hold a public hearing on **Tuesday, July 7, 2015 at 7:00 PM** in the Kennedale City Council Chambers at 405 Municipal Drive to receive comments on the following case.

**CASE BBA # 15-01** Public hearing and consideration of demolition approval regarding a city-initiated request for demolition of an "R-3" Single family residential home located on approximately .26 acres at 1012 Harrison St, legal description of Hilldale Addn Lot 4, Blk 5.

We are sending you this notification in case you would like to attend the public hearing. You are not required to attend the public hearing, but if you wish to attend, you will have the opportunity to speak either in favor of or against the request(s). If you would like more information about the case or the public hearing process, please let me know.

For your reference, a map showing the property in question is enclosed with this letter.

Sincerely,

Sandra Johnson  
Building Official  
P- 817-985-2130  
E- [sjohnson@cityofkennedale.com](mailto:sjohnson@cityofkennedale.com)



## BBA Case # 15-01

1012 Harrison St. Kennedale, TX  
76060



## Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (12); Sec. 15-49 Item (14);  
Sec. 15-49 Item (15); Sec. 15-49 Item (20); Sec. 15-49 Item (22); Sec. 15-49 Item (23).



Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (20); Sec. 15-49 Item (23)



## Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (12); Sec. 15-49 Item (14); Sec. 15-49 Item (15); Sec. 15-49 Item (20); Sec. 15-49 Item (22); Sec. 15-49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (12);  
Sec. 15-49 Item (14); Sec. 15-49 Item (15); Sec. 15-49 Item (16); Sec. 15-49 Item (18);  
Sec. 15-49 Item (20); Sec. 15-49 Item (22); Sec. 15-49 Item (23)



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (12); Sec. 15-49 Item (14); Sec. 15-49 Item (15); Sec. 15-49 Item (16); Sec. 15-49 Item (18); Sec. 15-49 Item (20); Sec. 15-49 Item (22); Sec. 15-49 Item (23)



Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (4); Sec. 15-49 Item (12); Sec. 15-49 Item (20); Sec. 15.49 Item (22); Sec. 15-49 Item (23)



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (4); Sec. 15-49 Item (12); Sec. 15-49 Item (20); Sec. 15.49 Item (22); Sec. 15-49 Item (23)



Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (12); Sec. 15-49 Item (19); Sec. 15-49 Item (20); Sec. 15-49 Item (22); Sec. 15-49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (12) Sec. 15-49 Item (15); Sec. 15-49 Item (16); Sec. 15-49 Item (20); Sec. 15-49 Item (22); Sec. 15-49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15.49 Item (12); Sec. 15.49 Item (16); Sec. 15.49 Item (18.c; 18.e; 18.l; 18.m; 18.p); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15.49 Item (3); Sec. 15.49 Item (12); Sec. 15.49 Item (16); Sec. 15.49 Item (18.c; 18.e; 18.l; 18.m; 18.p); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15.49 Item (23).



Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15.49 Item (12); Sec. 15.49 Item (16); Sec. 15.49 Item (19); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15.49 Item (4); Sec. 15.49 Item (12);  
Sec. 15.49 Item (16); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15.49 Item (23).



Violations noted:

Sec. 15.49 Item (1); Sec. 15-49 Item (12); Sec. 15.49 Item (16); Sec. 15.49 Item (18.g; 18.m); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15-49 Item (23).



Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15.49 Item (4); Sec. 15.49 Item (12);  
Sec. 15.49 Item (16); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15.49 Item (23).



Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15.49 Item (4); Sec. 15.49 Item (12);  
Sec. 15.49 Item (16); Sec. 15.49 Item (20); Sec. 15.49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15.49 (1); Sec. 15.49 (2); Sec. 15.49 (3); Sec. 15-49 Item (12); Sec. 15.49 Item (16); Sec. 15-49 Item (18.a; 18.e; 18.l; 18.m); Sec. 15.49 Item (20); Sec. 15-49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15.49 (1); Sec. 15-49 Item (12); Sec. 15-49 Item (15); Sec. 15.49 Item (16); Sec. 15-49 Item (18.a; 18.e; 18.l; 18.m); Sec. 15.49 Item (20); Sec. 15-49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15.49 (1); Sec. 15-49 Item (12); Sec. 15-49 Item (15); Sec. 15.49 Item (16); Sec. 15-49 Item (18.a; 18.e; 18.l; 18.m); Sec. 15.49 Item (20); Sec. 15-49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15.49 (1); Sec. 15-49 Item (12); Sec. 15-49 Item (15); Sec. 15.49 Item (16); Sec. 15-49 Item (18.a; 18.e; 18.l; 18.m); Sec. 15.49 Item (20); Sec. 15-49 Item (22); Sec. 15.49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (7); Sec. 15-49 Item (12); Sec. 15-49 Item (15); Sec. 15-49 Item (16); Sec. 15-49 Item (18.m); Sec. 15-49 Item (20), Sec. 15-49 Item (22); Sec. 15-49 Item (23).



## Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (7); Sec. 15-49 Item (12); Sec. 15-49 Item (15); Sec. 15-49 Item (16); Sec. 15-49 Item (18.m); Sec. 15-49 Item (20), Sec. 15-49 Item (22); Sec. 15-49 Item (23).



### Violations noted:

Sec. 15-49 Item (1); Sec. 15-49 Item (2); Sec. 15-49 Item (3); Sec. 15-49 Item (7); Sec. 15-49 Item (12); Sec. 15-49 Item (15); Sec. 15-49 Item (16); Sec. 15-49 Item (18.m); Sec. 15-49 Item (20), Sec. 15-49 Item (22); Sec. 15-49 Item (23).



**CITY OF  
KENNEDALE**

**DANGEROUS AND  
SUBSTANDARD BUILDING  
PUBLIC HEARING  
FOR ABATEMENT  
TO BE HELD FOR  
THIS SITE**

**FOR INFORMATION CALL:  
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