



# City of Lawrence

DAVID L. CORLISS  
CITY MANAGER

City Offices  
PO Box 708 66044-0708  
[www.lawrenceks.org](http://www.lawrenceks.org)

6 East 6<sup>th</sup> St  
785-832-3000  
FAX 785-832-3405

CITY COMMISSION

MAYOR  
ROBERT J. SCHUMM

COMMISSIONERS  
MICHAEL DEVER  
HUGH CARTER  
MIKE AMYX  
ARON E. CROMWELL

September 7, 2012

Patricia Sinclair  
331 Johnson Ave  
Lawrence, KS 66044

Dear Patricia,

This letter is a follow up to my August 28, 2012 letter to you, responding to a series of open records requests. Enclosed, I have provided you with copies of all of the building permits and code enforcement file contents for the time period June 2009 to present for the addresses you listed in your requests.

Any response to this letter, including clarifications of your requests, should be submitted to me in writing. I hope that the records we have been able to provide are helpful.

Sincerely,

Jonathan Douglass  
City Clerk



-----  
CASE TYPE  
Parcel Number  
ADDRESS  
ENVIRONMENTAL BLIGHT  
103-06-0-10-10-009.00-0  
1830 BARKER AVE  
LAWRENCE KS 660443763  
-----  
DATE ESTABLISHED  
INSPECTOR  
TENANT NAME  
TENANT NBR  
STATUS  
STATUS DATE

4/13/10

Case Closed

Julie Wyatt

CASE DATA: Certified Number

NOTICE NAMES: TARWAK LLC

OWNER

HISTORY:	SCHEDULED ACTION	STATUS	RESULTED	INSPECTOR	TIME
4/13/10	INITIAL INSPECTION RQST TEXT: Due to the ongoing issue with Pat Sinclair's property and code violations, she continues to state that there are violations on other properties in the 300 block of Johnson Ave. After appealing to the City Commission, I have been requested to inspect this entire block. I have today walked the entire block and documented with pictures.	COMPLETED	4/13/10	Julie Wyatt	4/16/10
	RSLT TEXT: no violations				4/16/10

TOTAL TIME:

-----  
 DATE ESTABLISHED 11/10/09 STATUS Case Closed  
 INSPECTOR Julie Wyatt TENANT NBR 2/23/10  
 PARCEL NUMBER  
 ADDRESS  
 ENVIRONMENTAL BLIGHT  
 103-06-0-10-06-033.00-0  
 1735 LEARNARD AVE  
 LAWRENCE KS 660443742

CASE DATA: Certified Number

NOTICE NAMES: HAMILL DAVID E OWNER

HISTORY: SCHEDULED ACTION STATUS RESULTED INSPECTOR TIME  
 11/10/09 INITIAL INSPECTION COMPLETED 11/10/09 Julie Wyatt  
 ROST TEXT: complaint from Pat Sinclair 11/10/09  
 RSLT TEXT: inspected - there are ladders in front drive, a large dump truck in back full of brush and a bobcat 11/10/09  
 11/10/09 COURTESY LETTER ISSUED 11/10/09  
 Respond to: (785) 832-3112 Date: 0/00/00  
 Send to: Owner name  
 Mail tracking #: HAMILL DAVID E  
 Name/address: 1735 LEARNARD AVE  
 LAWRENCE, KS 66044

Telephone:  
 Fax:  
 EMAIL: 12/01/09 REINSPECTION COMPLETED 2/23/10 Julie Wyatt  
 ROST TEXT: debris, equipment, etc removed? 11/10/09  
 RSLT TEXT: clear 2/23/10

TOTAL TIME:

VIOLATIONS:	DATE	DESCRIPTION	QTY	CODE	STATUS	RESOLVED
	11/10/09	ENVIRONMENTAL CODE LOCATION: YARD/DRIVE ENVIRONMENTAL CODE; SECTION 9-601 et seq. OF THE CODE OF THE CITY OF LAWRENCE, KANSAS, 2011 EDITION, AND AMENDMENTS THEREFO:	1	SECTION 9-601	In compliance	2/23/10
		NARRATIVE: The City Code does not allow for exterior storage of tools, equipment, etc. Compliance will require the yard/drive be cleared of any debris, ladders, tools, equipment, truck full of brush/debris, etc. **Also be advised that a residentially zoned property may not be used for the exterior storage of equipment (bobcats, construction type vehicles, equipment, tools, etc).				11/10/09 11/10/09 11/10/09 11/10/09 11/10/09 11/10/09



**City of Lawrence**  
PLANNING & DEVELOPMENT SERVICES

1 Riverfront Plaza, Suite 110  
P.O. Box 708  
Lawrence, KS 66044

[www.lawrenceks.org/pds/](http://www.lawrenceks.org/pds/)

Phone 785-832-7700  
Tdd 785-832-3205  
Fax 785-832-3110

## COURTESY NOTIFICATION

November 10, 2009

DAVID E HAMILL  
1735 LEARNARD AVE  
LAWRENCE, KS 660443742

Ref: 1735 LEARNARD AVE 103-06-0-10-06-033.00-0  
Case #: 09-20001766

Dear DAVID E HAMILL:

An inspection of the referenced property was conducted on November 10, 2009. At that time there were violation(s) of the Lawrence City Code. The attached sheet(s) provides an explanation of violation(s) for your property.

In advance, your cooperation in bringing the property into compliance is appreciated. The attached sheet explains what will be required to bring your property into compliance. A follow up inspection will be conducted on or about **December 01, 2009**. If you have any questions about this, please call the Code Enforcement Division; Code Enforcement Officer **Julie Wyatt** at **(785) 832-3112**.

Sincerely,

Brian Jimenez  
Code Enforcement Manager

Case number, type. . . . . : 09 20001766 ENVIRONMENTAL BLIGHT  
Violation, date. . . . . : ENVIRONMENTAL CODE 111009

Type information, press Enter.

The City Code does not allow for exterior storage of tools,  
equipment, etc. Compliance will require the yard/drive be  
cleared of any debris, ladders, tools, equipment, truck  
full of brush/debris, etc. \*\*Also be advised that a  
residentially zoned property may not be used for the  
exterior storage of equipment (bobcats, construction type  
vehicles, equipment, tools, etc).

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More...

F3=Exit F5=Copy F6=Insert F7=Delete F8=Time stamp  
F12=Cancel F21=User defaults

-----  
 CASE TYPE DATE ESTABLISHED STATUS STATUS DATE  
 Parcel Number INSPECTOR TENANT NAME TENANT NBR  
 ADDRESS  
 ENVIRONMENTAL BLIGHT 4/13/10 Case Closed 5/06/10  
 103-06-0-10-06-022.00-0  
 1824 BARKER AVE Julie Wyatt  
 LAWRENCE KS 660443720

CASE DATA: Certified Number

NOTICE NAMES: CASAD JOSEPH S OWNER

HISTORY: SCHEDULED ACTION STATUS RESULTED INSPECTOR TIME  
 4/13/10 INITIAL INSPECTION COMPLETED 4/13/10 Julie Wyatt  
 RQST TEXT: Due to the ongoing issue with Pat Sinclair's property and 4/16/10  
 code violations, she continues to state that there are 4/16/10  
 violations on other properties in the 300 block of Johnson 4/16/10  
 Ave. After appealing to the City Commission, I have been 4/16/10  
 requested to inspect this entire block. I have today walked 4/16/10  
 the entire block and documented with pictures. 4/16/10  
 RSLT TEXT: inspected, there are a few tree branches lying around in 4/16/10  
 the yard that could be picked up. 4/16/10

4/16/10 COURTESY LETTER ISSUED 4/16/10  
 Respond to: (785) 832-3112 Date: 0/00/00  
 Send to: Owner name  
 Mail tracking #: CASAD JOSEPH S  
 Name/address: 1824 BARKER AVE  
 LAWRENCE, KS 66044

Telephone:  
 Fax:  
 Email: 5/05/10 REINSPECTION COMPLETED 5/06/10 Julie Wyatt  
 RQST TEXT: yard cleaned up of tree branches? 4/16/10  
 RSLT TEXT: clear 5/06/10

TOTAL TIME:

VIOLATIONS: DATE DESCRIPTION QTY CODE STATUS In compliance RESOLVED  
 4/16/10 ENVIRONMENTAL CODE 1 SECTION 9-601 5/06/10  
 LOCATION: YARD  
 ENVIRONMENTAL CODE: SECTION 9-601 et seq. OF THE CODE OF  
 THE CITY OF LAWRENCE, KANSAS, 2011 EDITION, AND AMENDMENTS  
 THERETO;  
 NARRATIVE: The City Environmental Code requires yards to be kept free  
 of yard waste, tree branches, etc. Compliance will require  
 the yard to be cleared of fallen trees/branches, etc. 4/16/10  
 4/16/10  
 4/16/10



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## COURTESY NOTIFICATION

April 16, 2010

JOSEPH S CASAD  
1824 BARKER AVE  
LAWRENCE, KS 660443720

Ref: 1824 BARKER AVE 103-06-0-10-06-022.00-0  
Case #: 10-20000728

Dear JOSEPH S CASAD:

An inspection of the referenced property was conducted on April 13, 2010. At that time there were violation(s) of the Lawrence City Code. The attached sheet(s) provides an explanation of violation(s) for your property.

In advance, your cooperation in bringing the property into compliance is appreciated. The attached sheet explains what will be required to bring your property into compliance. A follow up inspection will be conducted on or about **May 04, 2010**. If you have any questions about this, please call the Code Enforcement Division; Code Enforcement Officer **Julie Wyatt** at **(785) 832-3112**.

Sincerely,

Brian Jimenez  
Code Enforcement Manager

Case number, type. . . . . : 10 20000728 ENVIRONMENTAL BLIGHT  
Violation, date. . . . . : ENVIRONMENTAL CODE

041610

Type information, press Enter.

The City Environmental Code requires yards to be kept free  
of yard waste, tree branches, etc. Compliance will require  
the yard to be cleared of fallen trees/branches, etc.

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F12=Cancel    F21=User defaults



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DATE ESTABLISHED STATUS  
-----  
INSPECTOR TENANT NAME TENANT NBR STATUS DATE  
-----  
5/14/10 Case Closed 5/27/10  
-----  
INSPECTOR TENANT NAME  
-----  
Julie Wyatt Case Closed  
-----  
103-06-0-10-06-022.00-0  
1824 BARKER AVE  
LAWRENCE KS 660443720

NOTICE NAMES: CASAD JOSEPH S OWNER  
SCHEDULED ACTION  
5/14/10 INITIAL INSPECTION  
RSLT TEXT: tall  
5/14/10 WEED NOTICE OF VIOLATION  
(785) 832-3112  
Respond to: Owner name  
Send to: CASAD JOSEPH S  
Mail tracking #: 1824 BARKER AVE  
Name/address: LAWRENCE, KS 66044  
Telephone:  
Fax:  
Email: 5/26/10 REINSPECTION  
RQST TEXT: mowed?  
RSLT TEXT: mowed

STATUS RESULTED INSPECTOR TIME  
COMPLETED 5/14/10 Julie Wyatt 5/14/10  
ISSUED 5/14/10  
Date: 0/00/00  
COMPLETED 5/27/10 Julie Wyatt 5/27/10

TOTAL TIME:



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Fax 785-832-3110

## NOTICE OF VIOLATION

May 14, 2010

**Case No: 10-20001026**

**OWNER OF RECORD:**

JOSEPH S CASAD  
1824 BARKER AVE  
LAWRENCE, KS 660443720

**Re: 1824 BARKER AVE**  
**PARCEL: 103-06-0-10-06-022.00-0**

This is to notify you that the condition on the referenced property is in violation of the City of Lawrence Weed Ordinance (City Code Section 18-301 *et seq.*). This ordinance prohibits any property owner from disregarding public safety by allowing grass, vines, weeds, etc. to mature to a height over 12" or otherwise constitute blight or a fire hazard to adjacent properties.

You are hereby ordered to mow and trim this area by **May 25, 2010** or 10 days to request, in writing, a hearing before the Community Development Advisory Committee. In the event that you do not mow and trim this area, the City will mow and trim this area and bill you directly. The bill will include the cost of cutting/trimming, and reasonable administrative costs. If you fail to pay this assessment, it will be added to your property taxes as a special assessment.

**No further notice will be given prior to the removal of weeds, grass, etc., in violation of the ordinance during the current year, 2010.**

If you have any questions concerning this, please contact Inspector **Julie Wyatt** at (785) 832-3112.

Sincerely,

Brian Jimenez  
Code Enforcement Manager

----- DATE ESTABLISHED STATUS -----

Case Type Parcel Number INSPECTOR TENANT NAME TENANT NBR STATUS DATE

WEEDS 103-06-0-10-06-022-00-0 7/14/10 Case Closed 8/03/10

1824 BARKER AVE Julie Wyatt

LAWRENCE KS 660443720

NARRATIVE: Complaint of weeds

7/14/10

NOTICE NAMES: CASAD JOSEPH S OWNER

HISTORY:	SCHEDULED ACTION	STATUS	RESULTED	INSPECTOR	TIME
7/15/10 INITIAL INSPECTION RSLT TEXT: tall	COMPLETED	7/15/10	Julie Wyatt	7/16/10	
7/16/10 CONTRACT TO MOWER NARRATIVE: nichols	COMPLETED	7/16/10	Julie Wyatt	7/16/10	
7/23/10 FOLLOW UP INSPECTION RSLT TEXT: mowed?	COMPLETED	7/26/10	Julie Wyatt	7/27/10	
7/26/10 RECEIVED BILL FROM CONTRACTOR NARRATIVE:	COMPLETED	7/26/10	0/00/00		
8/02/10 INVOICE OWNER NARRATIVE: INVOICE: \$40 MOW, \$25 ADMIN FEE	COMPLETED	8/02/10	8/03/10		

TOTAL TIME:

The entire set of Johnson Ave all have one inspection that was requested by the City Commission on April 13<sup>th</sup>. The only violation on the block that day was 331.

320 has one additional complaint that was found to be invalid.

322 has four additional complaints that were found to be invalid.

330 has three additional complaints that were found to be invalid.

I did not print anything as there are only computer entries indicating there were no violations.

330 has a complaint of a home occupation that was investigated. Print screen documents have been included. There were no paper files at all with no letter sent on this.

Case number . . . . . : 09 30000031  
 Type . . . . . : HOME OCCUPATION  
 Property address, ID . . . . : 330 JOHNSON AVE 33035  
 Tenant number, name . . . . :

Type options, press Enter.  
 1=Schedule/Print 2=Enter results 4=Delete step 6=Change date/days

Opt	Action Description	Day	Due	Dates		Days Until Next
				Scheduled	Resulted	
—	PERSONAL CONTACT	O		8/18/09	8/18/09	0
—	INITIAL INSPECTION	I	Tue 8/18/09	8/26/09	8/27/09	0
—	INITIAL INSPECTION	I	Thu 8/27/09	7/15/09	7/18/09	0
—	PHONE CALL	O	Sat 7/18/09	8/18/09	8/18/09	0
—	FOLLOW UP INSPECTION	I	Tue 8/18/09	9/08/09	10/05/09	0
—	PHONE CALL	O	Mon 10/05/09	10/01/09	10/01/09	0

F3=Exit      F6=Add action      F8=Recalculate set due dates      F12=Cancel  
 F14=Inspection maintenance      F15=Display calendar

Bottom

Case number, type. . . . . : 09 30000031 HOME OCCUPATION  
Action, date . . . . . : PERSONAL CONTACT

081809

Type information, press Enter.

Tim Houser came to our office and met with Brian and Julie.  
We discussed the complaint of the home occupation and  
violations associated with it. Violations to be fixed  
immediately will be that the employee will no longer come  
to this property to go to work and any exterior storage  
related to the business will be removed. Mr. Houser has a  
framing business, contracts work for Steve George  
currently. Brian advised Tim that he will call him in a few  
days to get back to him regarding the parking of a trailer  
at the property and if this is ok or not. We also advised  
that we will do a site visit next week to verify  
compliance.

More...

F3=Exit    F5=Copy    F6=Insert    F7=Delete    F8=Time stamp  
F12=Cancel    F21=User defaults

Case number, type. . . . . : 09 30000031 HOME OCCUPATION  
Inspection, date . . . . . : INITIAL INSPECTION

082609

Type information, press Enter.

inspect property for compliance with home occupation  
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F3=Exit    F5=Copy    F6=Insert    F7=Delete    F8=Time stamp  
F12=Cancel    F21=User defaults

Case number, type. . . . . : 09 30000031 HOME OCCUPATION  
Inspection, date . . . . . : INITIAL INSPECTION

082709

Type information, press Enter.

inspected, there are no vehicles, there is still some  
stored construction type materials. I will recheck in a  
week to see if gone  
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F3=Exit    F5=Copy    F6=Insert    F7=Delete    F8=Time stamp  
F12=Cancel    F21=User defaults



Case number, type. . . . . : 09 30000031 HOME OCCUPATION  
Action, date . . . . . : PHONE CALL

081809

Type information, press Enter.

Tim Houser called Brian and advised he is moving, will be  
out of the house next week and will then register this  
property as a rental. (8/18/09, 3:15pm)

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F3=Exit    F5=Copy    F6=Insert    F7=Delete    F8=Time stamp  
F12=Cancel    F21=User defaults

Case number, type. . . . . : 09 30000031 HOME OCCUPATION  
Inspection, date . . . . . : FOLLOW UP INSPECTION

100509

Type information, press Enter.

inspected, there is no appearance of a business except  
there is a small amount of scaffolding at the back/next to  
the garage, the owner advised this is personal

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F12=Cancel    F21=User defaults

Case number, type. . . . . : 09 30000031 HOME OCCUPATION  
Action, date . . . . . : PHONE CALL

100109

Type information, press Enter.

Called Tim Houser to discuss business issues. He said his  
worker is parking at the neighbors house (332 Johnson). I  
mentioned the scaffolding and ladder and he said that is  
his personal stuff, not his business and compared to the  
rest of the neighborhood it isn't an issue.

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F3=Exit    F5=Copy    F6=Insert    F7=Delete    F8=Time stamp  
F12=Cancel    F21=User defaults



CITY OF LAWRENCE, KANSAS  
 BUILDING SAFETY DIVISION  
 1 RIVERFRONT PLAZA, LOWER LEVEL SUITE 110  
 LAWRENCE, KS 66044  
 (785) 832-7700

Application Number . . . . . 12-00100743 Date 5/16/12  
 Property Address . . . . . 333 JOHNSON AVE  
 Application pin number . . . . . 756577  
 Parcel Number . . . . . 103-06-0-10-10-002.00-0  
 Application type description RESIDENTIAL RE-MODEL

TRYBOM, DIANE  
 333 JOHNSON AVE  
 LAWRENCE KS 66044

Application valuation . . . . . 3500  
 Property owner . . . . . TRYBOM DIANE M BUCIA

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Permit . . . . . BUILDING PERMIT  
 Additional desc . . . . . INTERIOR FRAMING/UPGRADES  
 Phone Access Code . . . . . 224949  
 Sub Contractor . . . . . QUALITY ELECTRIC OF DOUGLAS CO  
 Permit Fee . . . . . 97.25  
 Issue Date . . . . . 5/16/12 Valuation . . . . . 3500  
 Expiration Date . . . . . 11/12/12

Other Fees . . . . . PERMIT PENALTY 97.25

Fee summary	Charged	Paid	Credited	Due
Permit Fee Total	97.25	.00	.00	97.25
Other Fee Total	97.25	.00	.00	97.25
Grand Total	194.50	.00	.00	194.50

Building inspections must be scheduled before 4pm the day prior to the inspection.  
 INSPECTION REQUESTS CAN BE MADE BY:  
 - Calling the Inspection Hotline at (785)832-7710  
 - Online at [www.lawrenceks.org/pds](http://www.lawrenceks.org/pds)  
 - Email: [buildinginspections@ci.lawrence.ks.us](mailto:buildinginspections@ci.lawrence.ks.us)  
 - Fax: (785)832-3110  
 For more information about the Inspection Hotline, please visit our website at [www.lawrenceks.org/pds](http://www.lawrenceks.org/pds).



CITY OF LAWRENCE, KANSAS  
 BUILDING SAFETY DIVISION  
 1 RIVERFRONT PLAZA, LOWER LEVEL SUITE 110  
 LAWRENCE, KS 66044  
 (785) 832-7700

Application Number . . . . . 12-00100743 Page 2  
Date 5/16/12  
 Property Address . . . . . 333 JOHNSON AVE  
 Application pin number . . . . . 756577  
 Parcel Number . . . . . 103-06-0-10-10-002.00-0  
 Application description . . . . . RESIDENTIAL RE-MODEL  
 Permit . . . . . BUILDING PERMIT  
 Additional desc . . . . . INTERIOR FRAMING/UPGRADES  
 Phone Access Code . . . . . 224949

-----  
 Required Inspections

Seq	Phone Insp#	Insp Code	Description
10-1000	500	FBI	FINAL BUILDING INSPECTION
10	100	FRM	FRAMING
10	106	INS	INSULATION
10	300	RIE	ROUGH IN ELECTRICAL
10	200	RIM	ROUGH IN MECHANICAL
10	400	SO	STACK OUT

Building inspections must be scheduled before 4pm the day prior to the inspection.  
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 - Calling the Inspection Hotline at (785)832-7710  
 - Online at [www.lawrenceks.org/pds](http://www.lawrenceks.org/pds)  
 - Email [buildinginspections@ci.lawrence.ks.us](mailto:buildinginspections@ci.lawrence.ks.us)  
 - Fax (785)832-3110  
 For more information about the Inspection Hotline, please visit our website at [www.lawrenceks.org/pds](http://www.lawrenceks.org/pds)



**City of Lawrence**  
 PLANNING & DEVELOPMENT SERVICES DEPT  
 DEVELOPMENT SERVICES  
 CITY OF LAWRENCE

REVIEWED FOR  
 CODE COMPLIANCE

MAY 16 2012

Permit #

12-00100743

RECEIVED  
 MAY 15 2012  
 DEVELOPMENT SERVICES DEPT  
 CITY OF LAWRENCE

Building Safety Division  
 1 Riverfront Plaza, Suite 110  
 PO Box 708  
 Lawrence, KS 66044  
 Phone: (785) 832-7700  
 Fax: (785) 832-3110  
[www.lawrenceks.org/bds](http://www.lawrenceks.org/bds)  
[buildinginspections@ci.lawrence.ks.us](mailto:buildinginspections@ci.lawrence.ks.us)

**ONE & TWO FAMILY DWELLING PERMIT APPLICATION**

All Plans & Submittals: Two sets are required for submittal.

IF LARGER THAN 11X17 INCHES, ELECTRONIC MEDIA IS REQUIRED WITH PAPER SUBMITTALS.

**1. Applicant Name & Signature**

Date: 05/14/2012

Name: (print): Diane M. Trybom

Applicant Signature: [Signature]

Site Address: 333 Johnson Ave

OR

Legal Description: \_\_\_\_\_

Block

Lot

Subdivision

**2. Property Owner Information**

Name: Diane M. & Emil R. Trybom

Address: 333 Johnson Ave

Zip code: 66044

Phone No: \_\_\_\_\_

Cell phone No: \_\_\_\_\_

E-mail Address: dianeandjake@sunflower.com

**3. Project Valuation** \$ 3500<sup>00</sup>

**4. Project Information**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> New Single Family  | <input type="checkbox"/> Duplex (separation detail included) | <input type="checkbox"/> Accessory Building      |
| <input type="checkbox"/> Townhome           | <input type="checkbox"/> Addition                            | <input type="checkbox"/> Detached Garage/Carport |
| <input checked="" type="checkbox"/> Remodel | <input type="checkbox"/> Basement Finish                     | <input type="checkbox"/> Screened Porch          |
| <input type="checkbox"/> Seasonal Room      | <input type="checkbox"/> Deck                                | <input type="checkbox"/> Other: _____            |

Brief Description of Project: Remove Lath & Plaster replace w/ Drywall; Insulation, Replace 2x4" ceiling joist-4 2'x 8"  
Replace knob & tube wiring, upgrade HVAC Plumbing

**Documents & Submittals Included** (Drawings must be minimum 1/8" scale and fully dimensioned)

- |  |  |                                       |  |   |
|--|--|---------------------------------------|--|---|
| <input type="checkbox"/> Plot/Site Plan  | <input type="checkbox"/> Foundation Plan | <input type="checkbox"/> Floor Plans  | <input type="checkbox"/> Brace Wall Plan | <input type="checkbox"/> Elevations (all) |
| <input type="checkbox"/> Framing Details | <input type="checkbox"/> Manual J-Sheet  | <input type="checkbox"/> Truss Specs. | <input type="checkbox"/> Firewall Detail | <input type="checkbox"/> Other            |

None required as per Barry L. Walthall on 05/14/2012

**5. General Contractor Information**

Company Name: \_\_\_\_\_

License Type:    A    B    C

Contact Name: \_\_\_\_\_

License No. \_\_\_\_\_

Address: \_\_\_\_\_

Phone No: \_\_\_\_\_

Cell phone No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**6. Sub-Contractor Information:**

Sub-Contractor Type	License No.	Company Name	Phone No.
Class D Framing			
Class D Concrete			
Class D Concrete - Flatwork			
Class E Electrical	12-13589	Quality Electric	785-843-9211
Class E Plumbing			
Class E Mechanical			
Class E Mechanical - Fireplace			

**7. Dwelling Unit #1 Information (circle) Single Family Dwelling Duplex Unit No. 1 Townhome**

**Building Spaces:**  No. of Bedrooms  No. of Garage Bays  Slab on grade  
 No. of Full Baths  No. of 1/4 Baths  No. of 1/2 Baths  
**Basement Type (check):**  Full  Walk-out  Daylight

**Finished Area Square Feet:**  
 First Floor  Second Floor  Third Floor  Basement   
 Total Finished Living Square Feet \_\_\_\_\_

**Unfinished Area Square Feet:**  
 Basement  Garage  Total Unfinished Square Feet \_\_\_\_\_  
 Total Dwelling Unit #1 Footprint 1033 Sq Ft.

**8. Dwelling Unit #2 Information Duplex Unit No. 2**

**Building Spaces:**  No. of Bedrooms  No. of Garage Bays  Slab on grade  
 No. of Full Baths  No. of 1/4 Baths  No. of 1/2 Baths  
**Basement Type (check):**  Full  Walk-out  Daylight

**Finished Area Square Feet:**  
 First Floor  Second Floor  Third Floor  Basement   
 Total Finished Living Square Feet \_\_\_\_\_

**Unfinished Area Square Feet:**  
 Basement  Garage  Total Unfinished Square Feet \_\_\_\_\_  
 Total Dwelling Unit #2 Footprint \_\_\_\_\_

**9. Stormwater Square Footage**

Total Building Footprint Unit #1 & Unit #2 \_\_\_\_\_

**10. Construction Details (check all that apply)**

**Roofing:**  Comp. Shingle  Wood Shingle  Tile  Metal Seamed  
**Footing Type:**  Spread  Trench  Pier  
**Framing Type:**  Wood  Steel  
**Exterior Wall Type:**  Lap  4X8 Sheet  Brick  Stone  
**Radon Control:**  Roughed-in  Active



**City of Lawrence**  
 PLANNING & DEVELOPMENT SERVICES

Building Safety Division  
 PO Box 708  
 1 Riverfront Plaza, Suite 110  
 Lawrence, Kansas 66044  
 p. (785) 832-7700  
 f. (785) 832-3110  
[www.lawrenceks.org/pds](http://www.lawrenceks.org/pds)  
[buildinginspections@cl.lawrence.ks.us](mailto:buildinginspections@cl.lawrence.ks.us)

**OWNER/OCCUPANT FORM**

Date: MAY 10, 2012

I, DIANE TRYBOM, owner-occupant of the single-family dwelling at  
333 JOHNSON AVENUE wish to secure a permit to do

Building     Mechanical     Electrical     Plumbing on my premises.

All materials will be purchased and installed by myself according to the City code. I will reside in this dwelling for a minimum of one year from the date of completion.

It is my understanding that I/we may be required to obtain the services of a licensed contractor to complete the job in the event the Inspector determines there is a lack of ability to follow the code.

Diane Trybom  
 Print Name

[Signature]  
 Signature (Owner/Applicant)

[Signature]  
 Signature of Witness

\_\_\_\_\_  
 Title

<b>OFFICE USE ONLY</b>
Permit No. _____



Katherine Simmons

#12-00100743

**From:** Diane Trybom  
**Sent:** Wednesday, May 23, 2012 8:22 AM  
**To:** Katherine Simmons  
**Cc:** Barry Walthall  
**Subject:** Electrical Contractor for 333 Johnson Ave

Hi Katherine

The Electrical Contractor that I had submitted for my permit at 333 Johnson Avenue has changed from Quality Electric to JJ's Electrical Contractor (License No. 12-15445)

Thank You



City of Lawrence

Diane M. Trybom, *Deputy City Clerk*  
City Clerk's Office  
Office (785) 832-3308 | Fax (785) 832-3305  
[dtrybom@lawrenceks.org](mailto:dtrybom@lawrenceks.org) | [City of Lawrence, KS](http://CityofLawrenceKS.org)  
P.O. Box 708, Lawrence, KS 66044

Katherine Simmons

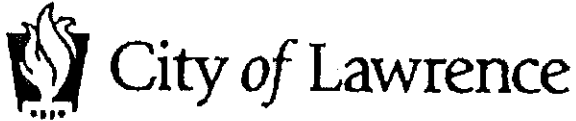
# 12-00100743

**From:** Diane Trybom  
**Sent:** Tuesday, May 29, 2012 8:07 AM  
**To:** Katherine Simmons  
**Subject:** Plumber added to building permit - 333 Johnson Ave

Hi Katherine

I need to add a plumber to the building permit. Noting is being added, just a pipe moved. Joe the Plumber Contract No. 12-10746

Thank you



Diane M. Trybom, *Deputy City Clerk*  
City Clerk's Office  
Office (785) 832-3308 | Fax (785) 832-3305  
[dtrybom@lawrenceks.org](mailto:dtrybom@lawrenceks.org) | [City of Lawrence, KS](http://CityofLawrence.org)  
P.O. Box 708, Lawrence, KS 66044



# CITY OF LAWRENCE, KANSAS

## INSPECTION DIVISION

Phone: (785) 832-3100  
 1 Riverfront Plaza  
 Lower Level / Suite 110

PERMIT NO: <b>36986</b>		DATE ISSUED: <b>5/15/2003</b>	
PERMIT TYPE: <b>MECH - MECHANICAL PERMIT</b>		PREPARED BY: <b>CARDIN M</b>	
PROJECT ADDRESS: <b>329 JOHNSON DR</b>		GENERAL CONTRACTOR:	
LEGAL DESCRIPTION:		ELECTRICAL CONTRACTOR:	
		PLUMBING CONTRACTOR:	
PROPERTY OWNER'S NAME / ADDRESS:	ZONING:	MECHANICAL CONTRACTOR: <b>NIEHOFF HTG AND AIR</b>	
ADDITIONAL DESCRIPTION:			

**SPECIAL NOTES & RESTRICTIONS:**

**CHANGING OUT THE FURNACE**

**REQUIRED INSPECTIONS**

FINAL BUILDING	FRAMING	ROUGH-IN ELECTRICAL	SITE PLAN APPROVAL
FINAL ELECTRICAL	FOOTING	ROUGH-IN MECHANICAL	SPECIAL MECHANICAL
<input checked="" type="checkbox"/> FINAL MECHANICAL	GAS LINE	ROUGH-IN PLUMBING	STACK OUT
FINAL OCCUPANCY	GAS METER	SEWER	TEMPORARY POWER
FINAL PLUMBING	PERMANENT SERVICE	SIGN INSPECTION	

I hereby certify that I have read and examined this permit and that the information stated herein is true and correct. I agree to comply with all laws, codes, and ordinances applicable to the work approved hereby, and to give prompt and timely notice to the appropriate authority when the required inspections noted above are due to be performed. I accept full responsibility for insuring that all required inspections are performed at the appropriate time, the work approved and that, in the case of new construction, no occupancy of the premises is permitted until authorized by the Building Inspection Division.

APPLICANT'S NAME _____ PRINT NAME _____ SIGNATURE _____	BLDG INSPECTOR SIGNATURE _____ <b>11/15/2003</b> DATE EXPIRES	ESTIMATED VALUATION <b>1100</b> PERMIT FEE <b>33.00</b>
--	--	--

# PERMIT APPLICATION

## RECEIVED

### Select Permit Type:

Mechanical  Electrical  Plumbing  Sprinkler System  MAY 2 2003

Date: 5-12-03

Project Address: 329 Johnson Drive

NEIGHBORHOOD RESOURCES

Residential  Commercial  Homeowner as contractor

Contractor: Niehoff Heating & Air

Phone: \_\_\_\_\_

Sub-Contractor: \_\_\_\_\_

Phone: \_\_\_\_\_

Sub-Contractor: \_\_\_\_\_

Phone: \_\_\_\_\_

Property Owner: McGrew Real Estate

Phone: Connie Friesen

Address: 1501 Kasold

City: Lawrence State: KO

Zip: 66047

### DETAILED DESCRIPTION OF WORK (Attach appropriate information):

Changing out the furnace

527 AA ja

\* REQUESTED INSPECTION DATE: 5/27/03 PM \*

PROJECT VALUATION: \$ 1100.00

PERMIT COST: <u>33.00</u>	OFFICIAL ONLY	PERMIT #. <u>30996</u>
APPROVED BY: <u>[Signature]</u>		
RIM <input checked="" type="checkbox"/> FM <input type="checkbox"/>	GL <input type="checkbox"/> GM <input type="checkbox"/> SWR <input type="checkbox"/> RIP <input type="checkbox"/> SD <input type="checkbox"/> LP <input type="checkbox"/> TP <input type="checkbox"/> RIE <input type="checkbox"/> PS <input type="checkbox"/> FL <input type="checkbox"/>	

\*Please allow 2 business days for processing application before calling for inspection.

Codes Enforcement Division, PO Box 708, Lawrence, KS 66044  
(785) 832-3100 Office (785) 832-3110 Fax  
[hulkdmgmtpechgsul.ci.lawrence.ks.us](http://hulkdmgmtpechgsul.ci.lawrence.ks.us)

Faxed to the City of Lawrence on 5/12/03  
Needs a Permit and a inspection on 5/27/03 PM

LEGAL PAGE

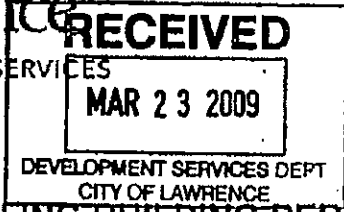
Withdrawn per applicant

5-5-09

Application No. 09-00100286



City of Lawrence  
PLANNING & DEVELOPMENT SERVICES



Plan Review/Licensing Division  
PO Box 708  
1 Riverfront Plaza, Suite 110  
Lawrence, Kansas 66044  
p. (785) 832-7700  
f. (785) 832-3110  
www.lawrenceneighres.org  
buildinginspections@ci.lawrence.ks.us

ONE & TWO FAMILY DWELLING BUILDING PERMIT APPLICATION

2006 International Residential Code  
2006 Energy Conservation Code

1. Date: 3-23-09

Name (print): Tim Houser  
Applicant Signature: [Signature]

Site Address: 330 Johnson Ave

Or

Legal Description: \_\_\_\_\_  
Block 8 Subdivision made laws

2. PROJECT OWNER INFORMATION

Name: Tim Houser

Address: 330 Johnson Ave

Phone No. \_\_\_\_\_

Cell Phone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

3. PROJECT INFORMATION

- Building Type:  New Single Family  Duplex- Floor or Wall Separation Detail Attached  Townhome
- Addition  Remodel  Basement Finish  Seasonal Room
- Deck  Accessory Building  Detached Garage/Carport
- Other: \_\_\_\_\_

The Radon Control System Method Will Be:  Roughed-In  Operational

Brief Description of Project: Garage Addition

4. PROJECT VALUATION: \$2500

5. CONTRACTOR INFORMATION:

Contractor License Type:  A  B  C

License No. \_\_\_\_\_

Company Name: JDC CONSTRUCTION

Contact Name: Tim Houser

Address: 330 Johnson

Phone No. \_\_\_\_\_

Cell Phone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

**6. SUB-CONTRACTOR INFORMATION**

	License No.	Company Name	Phone No.
Class D Framing:		JDC	
Class D Concrete:		JDC	
Class D Concrete-Flatwork:			
Class E Electrical:			
Class E Plumbing:			
Class E Mechanical:			
Class E Mechanical Fireplace:			

**7. DWELLING UNIT INFORMATION**

(complete this column for a single family dwelling or unit one of a duplex)

Finished Area Square Feet-First Floor: \_\_\_\_\_ Second Floor: \_\_\_\_\_  
 Third Floor: \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 Basement, Unfinished Sq. Ft. \_\_\_\_\_ Basement Finished Sq. Ft. \_\_\_\_\_  
 Garage Sq. Ft.: \_\_\_\_\_ Number of Cars: \_\_\_\_\_ Building Footprint Sq. Ft. \_\_\_\_\_  
 No. of Bedrooms: \_\_\_\_\_ No. of Bathrooms: Full- \_\_\_\_\_ 3/4- \_\_\_\_\_ 1/2- \_\_\_\_\_  
 Basement type:  Full  Walk-out  Daylight

**8. DUPLEX DWELLING UNIT NO. 2 INFORMATION**

First Floor: \_\_\_\_\_ Second Floor: \_\_\_\_\_ Third Floor: \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 \_\_\_\_\_  
 Basement, Unfinished Sq. Ft. \_\_\_\_\_ Basement Finished Sq. Ft. \_\_\_\_\_  
 Garage Sq. Ft.: \_\_\_\_\_ Number of Cars: \_\_\_\_\_ Building Footprint Sq. Ft. \_\_\_\_\_  
 No. of Bedrooms: \_\_\_\_\_ No. of Bathrooms: Full- \_\_\_\_\_ 3/4- \_\_\_\_\_ 1/2- \_\_\_\_\_  
 Basement type:  Full  Walk-out  Daylight

**9. TOWNHOME DWELLING UNIT INFORMATION**

First Floor: \_\_\_\_\_ Second Floor: \_\_\_\_\_ Third Floor: \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
 \_\_\_\_\_  
 Basement, Unfinished Sq. Ft. \_\_\_\_\_ Basement Finished Sq. Ft. \_\_\_\_\_  
 Garage Sq. Ft.: \_\_\_\_\_ Number of Cars: \_\_\_\_\_ Building Footprint Sq. Ft. \_\_\_\_\_  
 No. of Bedrooms: \_\_\_\_\_ No. of Bathrooms: Full- \_\_\_\_\_ 3/4- \_\_\_\_\_ 1/2- \_\_\_\_\_  
 Basement type:  Full  Walk-out  Daylight

**10. STORMWATER SQUARE FOOTAGE, Building Footprint in Sq. Ft.** \_\_\_\_\_

**11. CONSTRUCTION DETAILS**

- Roofing Material:  Composition Shingle  Wood Shingle  Tile  Metal Standing Seam  
 Other: \_\_\_\_\_
- Footing Type:  Spread  Trench  Pier
- Framing Type:  Wood  Steel
- Exterior Wall Cover:  Lap  4x8 Sheet  Stucco  Brick  Stone  
 Other: \_\_\_\_\_

<b>OFFICE USE ONLY</b>		
Permit Fee: \$ _____	No. of Trees (X \$245.00 each): _____	Street Tree Fee: \$ _____
<input type="checkbox"/> Historic Building <input type="checkbox"/> Historic Environmental <input type="checkbox"/> River Levee Environmental <input type="checkbox"/> 500 feet <input type="checkbox"/> 1,000 feet <input type="checkbox"/> Floodplain: FDP <input type="checkbox"/> Required <input type="checkbox"/> Not Required <input type="checkbox"/> Floodplain Development Permit <input type="checkbox"/> Received <input type="checkbox"/> Not Received <input type="checkbox"/> Permit Moratorium Area <input type="checkbox"/> KU 150 ft. Environmental <input type="checkbox"/> Drainage Easement <input type="checkbox"/> Public Works Release <input type="checkbox"/> Received <input type="checkbox"/> Not received		
<b>ZONING</b>		Approved By: _____ Date: _____
Actual Setbacks:	Front: _____ Rear: _____ Side Right: _____ Side Left: _____	
Actual Lot Size (square feet):	_____	
Soils Report Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No Alley Way: <input type="checkbox"/> Yes <input type="checkbox"/> No TRE Form Required: <input type="checkbox"/> Yes <input type="checkbox"/> No The accessory building square footage is equal to or less than 30% of the required rear yard area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> FBI <input type="checkbox"/> FE <input type="checkbox"/> FP <input type="checkbox"/> FM <input type="checkbox"/> FTG <input type="checkbox"/> FW <input type="checkbox"/> FRM <input type="checkbox"/> TP <input type="checkbox"/> RIE <input type="checkbox"/> RIM <input type="checkbox"/> PS <input type="checkbox"/> RIP <input type="checkbox"/> SWR <input type="checkbox"/> SO <input type="checkbox"/> GL <input type="checkbox"/> GM		

MAPLE LAWN LT. 8

Garage 24x24

Scale 1/4" = 1'-0" N.E.S.T.

Timi Houser  
S.D.C. INC.

Proposed Garage  
Addition at 330  
Johnson Ave.

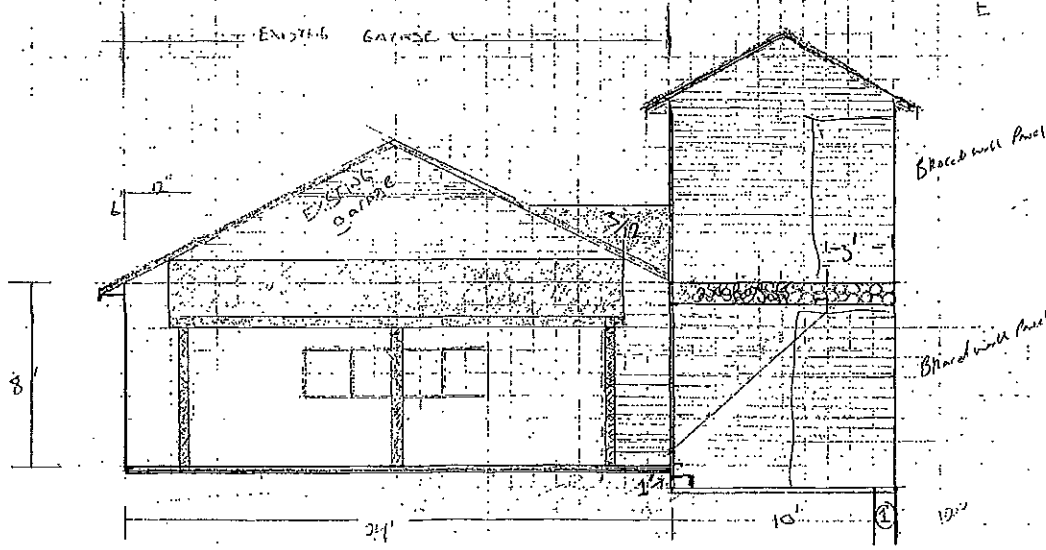
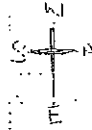
① Trench Footing TYP

- 2x4 Wall Joist
- 2x10 Floor Joist w/ 3/4" T & G Flooring
- 2x6 Rafter
- 2x6 Ceiling Joist
- 2x10 Ridge Board

1/2" OSB Sheathing + Cost. Lap Siding

1/2" OSB Roof Sheathing w/ Cor. A. Shingles

24x10 ADDITION  
Tool Storage +  
Work Area





PROPERTY LINE

Side Lot Line

10' 6"  
8' 6"

EXISTING GARAGE

2x6  
Rafters

12' 6"

2x10 Rafters

Ridge  
for  
ceiling

12' 6"

PICTURE

5' soffit

2' 6"

57'  
NOT TO  
SCALE

21'  
(NOT TO SCALE)

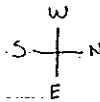
1/4" = 1'



Lot Size 50' X 136.9'  
MAPLE LAWN LOT #18

3/32 scale

PLAT



#7

marker

marker

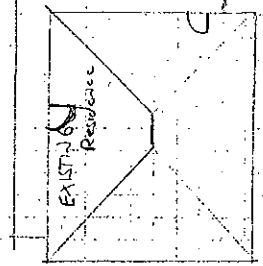
← 136.9' →

Side Lot Line

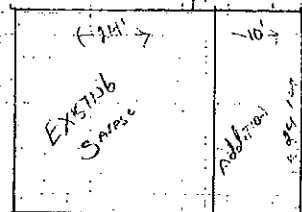
PROPERTY LINE

DRIVEWAY

COVERED PATIO



← 25' →



5' MIN.

37'

#8

Neat Lot Line

DRAINAGE

330 Johnson Ave.

332 Johnson

← 47' →

21'

PROPERTY LINE

Side Lot Line

#9

Neat Lot Line



CITY OF LAWRENCE, KANSAS  
 BUILDING SAFETY DIVISION  
 1 RIVERFRONT PLAZA, LOWER LEVEL SUITE 110  
 LAWRENCE, KS 66044  
 (785) 832-7700

Application Number . . . . . 11-00100158 Date 2/10/11  
 Property Address . . . . . 342 JOHNSON AVE  
 Application pin number . . . . . 065866  
 Parcel Number . . . . . 103-06-0-10-06-031.00-0  
 Application type description MECHANICAL PERMIT

A & H AIR COND. AND HEATING  
 ALAN WRIGHT  
 1717 COLLEGE ST  
 BALDWIN CITY KS 66006

Application valuation . . . . . 2200  
 Property owner . . . . . HEWLETT GLENDA A  
 Other struct info . . . . . MECH INDOOR UNIT MODEL # N/A  
 MECH OUTDOOR UNIT MODEL # N/A

-----  
 Permit . . . . . MECHANICAL- RESIDENTIAL  
 Additional desc . . . . . INSTALL FURNACE  
 Phone Access Code . . . . . 192567  
 Permit Fee . . . . . 65.00  
 Issue Date . . . . . 2/10/11 Valuation . . . . . 2200  
 Expiration Date . . . . . 3/12/11  
 -----

Fee summary	Charged	Paid	Credited	Due
Permit Fee Total	65.00	.00	.00	65.00
Grand Total	65.00	.00	.00	65.00

Building inspections must be scheduled before 4pm the day prior to the inspection.  
 INSPECTION REQUESTS CAN BE MADE BY:  
 - Calling the Inspection Hotline at (785)832-7710  
 - Online at [www.lawrenceks.org/pds](http://www.lawrenceks.org/pds)  
 - Email [buildinginspections@ci.lawrence.ks.us](mailto:buildinginspections@ci.lawrence.ks.us)  
 - Fax (785)832-3110  
 For more information about the Inspection Hotline, please visit our website at [www.lawrenceks.org/pds](http://www.lawrenceks.org/pds).



# City of Lawrence

PLANNING & DEVELOPMENT SERVICES

Building Safety Division  
PO Box 708  
1 Riverfront Plaza, Suite 110  
Lawrence, Kansas 66044  
p. (785) 832-7700  
f. (785) 832-3110

[www.lawrenceks.org/pds](http://www.lawrenceks.org/pds)  
[buildinginspections@ci.lawrence.ks.us](mailto:buildinginspections@ci.lawrence.ks.us)

## ELECTRICAL, MECHANICAL, AND PLUMBING MISCELLANEOUS PERMIT

PLEASE ALLOW 2 BUSINESS DAYS FOR PROCESSING APPLICATION BEFORE CALLING FOR INSPECTION

Date: 1/17/2011

Project Valuation: \$2,700.00

Select Permit Type:  Mechanical  Electrical  Plumbing

Select Building Type:  Residential One/Two Dwelling  Residential Apartment/Duplex  Commercial

Hewlett

Homeowner as Contractor (please complete this form and the Owner/Occupant Form on back)

Project Address: 342 Johnson Ave, Lawrence, KS 66044

### CONTRACTOR INFORMATION

Business Name: A&H Air Conditioning and Heating

Address: 1717 College St. Baldwin KS 66006  
Address City State Zip Code

Phone No. 785-749-0600 Cell Phone No. \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### SUB-CONTRACTOR INFORMATION

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Address City State Zip Code

Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

DETAILED DESCRIPTION OF WORK: Install Furnace  
(Attach appropriate information)

Please Print Name: Alan Wright

Signature of Applicant: Alan Wright

REQUESTED INSPECTION DATE: \_\_\_\_\_

### OFFICE USE ONLY

Permit Cost: \_\_\_\_\_ Permit No. 11-00100158

Approved By: \_\_\_\_\_  Paid Staff Initials: \_\_\_\_\_