CHECK ALL THAT APPLY

TO THIS FILE:

☐ KNOWN BY ALTERNATE ADDRESS:

_____

☐ PLANS ON FILE:

☒ PICTURES/NEGATIVE ON FILE

☐ OTHER (please explain)

_____

AM 97

Renewal

FIRE SAFETY INSPECTION RECORD

- [x] LICENSE
- [ ] PERMIT
- [ ] COMPLAINT/REFERRAL
- [ ] EAST
- [ ] WEST
- [x] SPECIAL

Atlas

LOCATION: 302 Goodman St. N

Vibe Lounge

PERSON CONTACTED:

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	TELEPHONE#: OWNER NAME: OWNER ADDRESS: OWNER PHONE: 442-8423 / NOTES	OK TO FILE	INSPECTOR
2/15/13	1500							GARY WILLIAMS 298-3326 vibelounge@frontier.com	X	MS

	Y	N
Sprinkler System		
Alarm Permit		
Cooking Hood		
Fire Alarm System		
Standpipe System		
Cooking System		
Bars/Wires on Windows		
Lock Box		
NFPA 901 Type		
Building Const Type		
Number of Stories		
Posted Occupancy		

Permit#: _____

Local Central (circle one)

APPROVED
FIRE SAFETY DIVISION

_____
Fire Marshal

CLS1080

Date Printed: February 5, 2013

City of Rochester
City Code License - Amusement Center
For Application#: 97

Current Status/Date: **02/01/2013 P - Pending**

Applic. Date: **02/01/2013** Issue Date: Start Date: **02/01/2013** Expiration Date: **01/31/2014**

General Comments:

License Fee: **$325.00** ***** RENEWAL LICENSE ***** Last Chgd: **02/05/2013 cioppag**

Applicant: **GARY WILLIAMS** Residence: **94 DELMAN DR**

DOB: **09/17/1968** Home Phone: **(585) 436-5362** City, State, Zip: **ROCHESTER, NY 14624**

Business Name: **VIBE LOUNGE** Business Phone **(585) 298-3326**

Business Name:

Activity: **BAR/REST. LIVE ENTERTAINMENT**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: **GARY STERN** Residence: **38 TOBYBROOK 38 TOBYBROOK**

DOB: **05/08/1943** Home Phone: **(585) 760-2396** City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: **1120853** Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **A / 02/01/2013** Reviewer: **mcsains**

3 Game Limit? **Yes** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date: **02/01/2013**

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **No** MCVB- **No** Cart Inspection Date: Approved: **No**

Status / Date: **W / 02/01/2013** Reviewer:

Activity Code:

Comments:

Fire Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 02/05/2013** Reviewer: ~~milesa~~ SCIALDONE

Occupancy: ~~156~~ 295 Cart Inspection Date: Approved: **No** 2/28/13

Comments:

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: / Reviewer:

Comments:

EC 8-2

FIRE SAFETY INSPECTION RECORD

Renewal

☒ LICENSE ☐ EAST
☐ PERMIT ☐ WEST
☐ COMPLAINT/REFERRAL ☒ SPECIAL

Miles

LOCATION: 302 Goodman St N
Vibe Lounge

PERSON CONTACTED:

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	TELEPHONE#: OWNER NAME: OWNER ADDRESS: OWNER PHONE: / NOTES	OK TO FILE	INSPECTOR
2/15/13	1:30							PUT STERN ON PATIO0 FOR BIGGER PERMIT	X	MS
								BOTH EXITS MEET INSP. GOOD 2/13		
								✓ PA Permit		

STERN PROPERTIES

	Y	N
Sprinkler System	X	
Alarm Permit		
Cooking Hood		X
Fire Alarm System	X	
Standpipe System		X
Cooking System		X
Bars/Wires on Windows		NA
Lock Box		NA
NFPA 901 Type		
Building Const Type		
Number of Stories	1	
Posted Occupancy	245	

Permit#: _____

Local Central (circle one)

APPROVED
FIRE SAFETY DIVISION

_____
Fire Marshal

Date Printed: February 5, 2013

City of Rochester
City Code License - Entertainment Center
For Application#: 82

Current Status/Date: **02/01/2013 P - Pending**

Applic. Date: **02/01/2013** Issue Date: Start Date: **02/01/2013** Expiration Date: **01/31/2014**

General Comments:

License Fee: **$475.00** ***** RENEWAL LICENSE ***** Last Chgd: **02/05/2013 cioppag**

Applicant: **GARY WILLIAMS** Residence: **94 DELMAN DR**

DOB: **09/17/1968** Home Phone: **(585) 436-5362** City, State, Zip: **ROCHESTER, NY 14624**

Business Name: **VIBE LOUNGE** Business Phone **(585) 298-3326**

Business Name:

Activity: **BAR/REST LIVE ENTERTAINMENT**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: **GARY STERN** Residence: **38 TOBYBROOK 38 TOBYBROOK**

DOB: **05/08/1943** Home Phone: **(585) 760-2396** City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: **1120853** Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **A / 02/01/2013** Reviewer: **mcsains**

3 Game Limit? **No** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date: **02/01/2013**

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **No** MCVB- **No** Cart Inspection Date: Approved: **No**

Status / Date: **W / 02/01/2013** Reviewer:

Activity Code:

Comments:

Fire Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 02/05/2013** Reviewer: ~~milesa~~ SCIALDONE

Occupancy: ~~135~~ 295 Cart Inspection Date: Approved: **No**

Comments: 2/28/13

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 02/01/2013** Reviewer:

Comments:

City of Rochester
FIRE DEPARTMENT

FIRE SAFETY DIVISION

185 Exchange Blvd., Suite 665
Rochester, New York 14614
(585) 428-7037

PERMIT

DATE 03/07/13

For keeping, storing, using, installing, manufacturing, handling, transporting, or otherwise employing flammable, combustible, or explosive materials, or materials, processes, or equipment, which if improperly used may produce conditions hazardous to life or property.

TO WHOM IT MAY CONCERN:
By virtue of the provisions of the Fire Prevention Code of the City of Rochester, NY.,

14-02065	PERMIT NUMBER

STERN PROPERTIES
302 GOODMAN ST N

having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Fire Prevention Code can be observed, authority is hereby given and this PERMIT is GRANTED for:

PERMIT CODE	PERMIT CATAGORY	FEE
5412B25B	PUBLIC ASSEMBLY/OVER 249 CAPACITY	NF

TOTAL $ 0

This PERMIT is issued and accepted on condition that all Fire Prevention Code provisions now adopted, or that may hereafter be adopted, shall be complied with, and said PERMIT will become valid only after receipt of total fee payment.

THIS PERMIT EXPIRES 02/28/14

This permit does not take the place of any License required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

FIRE MARSHAL

THIS PERMIT MUST AT ALL TIMES BE KEPT ON FILE AT THE PREMISES MENTIONED ABOVE

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS ON YOUR CHECK OR MONEY ORDER

00302 GOODMAN ST N

14-02065	PERMIT NUMBER
03/07/13	INVOICE DATE
04/07/13	DUE DATE
$ 0	AMOUNT DUE

ATTENTION: GARY STERN
STERN PROPERTIES
274 N GOODMAN ST
ROCHESTER NY 14607

FD513

tdpmt1

EC 152 FLAGLER-MITCHELL

FIRE SAFETY INSPECTION RECORD

LOCATION: 302 N. GOODMAN ST.

■ LICENSE ☐ EAST
☐ PERMIT ☐ WEST
☐ COMPLAINT/REFERRAL ☐ SPECIAL

LIC New

PERSON CONTACTED:

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	TELEPHONE#: OWNER NAME: OWNER ADDRESS: OWNER PHONE: / NOTES	OK TO FILE	INSPECTOR
5/22/12	11:00						X	need to Add to Red Alert	X	EE

	Y	N
Sprinkler System	✓	
Alarm Permit		
Cooking Hood		
Fire Alarm System		
Standpipe System		
Cooking System		
Bars/Wires on Windows		
Lock Box		
NFPA 901 Type		
Building Const Type		
Number of Stories		
Posted Occupancy	295	

Permit#: _____

Local **Central** (circle one)

APPROVED
FIRE SAFETY DIVISION

_____
Fire Marshal

CLS1080

Date Printed: May 11, 2012

City of Rochester
City Code License - Entertainment Center
For Application#: 152

Current Status/Date: **05/11/2012 V - Wait CZC**

Applic. Date: **05/11/2012** Issue Date: Start Date: **02/01/2012** Expiration Date: **01/31/2013**

General Comments:

License Fee: **$475.00** ***** NEW LICENSE ***** Last Chgd: **05/11/2012 Lehrm**

Applicant: **GARY WILLIAMS** Residence: **94 DELMAN DR**

DOB: **09/17/1968** Home Phone: **(585) 436-5362** City, State, Zip: **ROCHESTER, NY 14624**

Business Name: **VIBE LOUNGE** Business Phone **(585) 298-3326**

Business Name:

Activity: **BAR/REST LIVE ENTERTAINMENT**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: **GARY STERN** Residence: **38 TOBYBROOK 38 TOBYBROOK**

DOB: **05/08/1943** Home Phone: **(585) 760-2396** City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 05/11/2012** Reviewer:

3 Game Limit? **Yes** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date:

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **No** MCVB- **No** Cart Inspection Date: Approved: **No**

Status / Date: **W / 05/11/2012** Reviewer:

Activity Code:

Comments:

Fire Approval 5/22/12 Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 05/11/2012** Reviewer: **flaglere**

Occupancy: ~~0-295~~ Cart Inspection Date: Approved: ~~No~~ Yes

Comments:

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 05/11/2012** Reviewer:

Comments:

AM 155

FLAGLER-MITCHELL

FIRE SAFETY INSPECTION RECORD

LOCATION: 302 N. GOODMAN ST.

- [x] LICENSE
- [ ] PERMIT
- [ ] COMPLAINT/REFERRAL
- [ ] EAST
- [ ] WEST
- [ ] SPECIAL

LIC New

PERSON CONTACTED:

DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES (TELEPHONE#: / OWNER NAME: / OWNER ADDRESS: / OWNER PHONE:)	OK TO FILE	INSPECTOR
DATE RECEIVED IN FIRE SAFETY										
5/22/17	11:00						X	~~Text message 5/18/17~~ Add to Red Alert	X	EF

	Y	N
Sprinkler System	✓	
Alarm Permit		
Cooking Hood		
Fire Alarm System		
Standpipe System		
Cooking System		
Bars/Wires on Windows		
Lock Box		
NFPA 901 Type		
Building Const Type		
Number of Stories		
Posted Occupancy	295	

Permit#: _____

Local **Central** (circle one)

APPROVED
FIRE SAFETY DIVISION

Fire Marshal

CLS1080

Date Printed: May 11, 2012

City of Rochester
City Code License - Amusement Center
For Application#: 155

Current Status/Date: **05/11/2012 V - Wait CZC**

Applic. Date: **05/11/2012** Issue Date: Start Date: **02/01/2012** Expiration Date: **01/31/2013**

General Comments:

License Fee: **$325.00** ***** NEW LICENSE ***** Last Chgd: **05/11/2012 Lehrm**

Applicant: **GARY WILLIAMS** Residence: **94 DELMAN DR**

DOB: **09/17/1968** Home Phone: **(585) 436-5362** City, State, Zip: **ROCHESTER, NY 14624**

Business Name: **VIBE LOUNGE** Business Phone **(585) 298-3326**

Business Name:

Activity: **BAR/REST. LIVE ENTERTAINMENT**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: **GARY STERN** Residence: **38 TOBYBROOK 38 TOBYBROOK**

DOB: **05/08/1943** Home Phone: **(585) 760-2396** City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 05/11/2012** Reviewer:

3 Game Limit? **Yes** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date:

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **No** MCVB- **No** Cart Inspection Date: Approved: **No**

Status / Date: **W / 05/11/2012** Reviewer:

Activity Code:

Comments:

Fire Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 05/11/2012** Reviewer: **flaglere**

Occupancy: ~~0~~ 295 Cart Inspection Date: Approved: ~~No~~ Yes

Comments: 5/22/12

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: / Reviewer:

Comments:

City of Rochester
FIRE DEPARTMENT
PERMIT

FIRE SAFETY DIVISION
185 Exchange Blvd., Suite 665
Rochester, New York 14614
(585) 428-7037

DATE 03/28/12

For keeping, storing, using, installing, manufacturing, handling, transporting, or otherwise employing flammable, combustible, or explosive materials, or materials, processes, or equipment, which if improperly used may produce conditions hazardous to life or property.

TO WHOM IT MAY CONCERN:
By virtue of the provisions of the Fire Prevention Code of the City of Rochester, NY.,

SALENA'S MEXICAN RESTAURANT
302 GOODMAN ST N

13-03041	PERMIT NUMBER

having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Fire Prevention Code can be observed, authority is hereby given and this PERMIT is GRANTED for:

PERMIT CODE	PERMIT CATAGORY	FEE
5412B16	OVEN OR KILN OPERATION INDUST/COMM	$ 70
5412B21B	LPG LESS THAN 1000	$ 70

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS
ON YOUR CHECK OR MONEY ORDER
00302 GOODMAN ST N

13-03041	PERMIT NUMBER
03/28/12	INVOICE DATE
04/28/12	DUE DATE
$ 140	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

Pd 4/11/12

FD513

fdpmt1

THIS PERMIT EXPIRES 03/31/13

This permit does not take the place of any License required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

FIRE MARSHAL

THIS PERMIT MUST AT ALL TIMES BE KEPT ON FILE AT THE PREMISES MENTIONED ABOVE

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS
ON YOUR CHECK OR MONEY ORDER
00302 GOODMAN ST N

13-03041	PERMIT NUMBER
03/28/12	INVOICE DATE
04/28/12	DUE DATE
$ 140	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

FD513

fdpmt1

Permit fee payments not received by the due date will be considered delinquent.

These delinquent properties operating with invalid permits will be subject to the issuance of a Municipal Code Violations Summons pursuant to Chapter 54-10 of the Municipal Code.

Municipal Code Summons Schedule

	Initial	Default
1st Offense, or after 30 days	$ 75.00	$150.00
2nd Offense, or after 60 days	$150.00	$300.00
3rd Offense, or after 90 days	$375.00	$750.00

FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☑ PERMIT ☐ COMPLAINT/REFERRAL

☑ EAST ☐ WEST ☐ SPECIAL

Ra

LOCATION: 302 GOODMAN ST N
SALENA'S MEXICAN RESTAURANT

PERSON CONTACTED:

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	TELEPHONE#: OWNER NAME: OWNER ADDRESS: OWNER PHONE: / NOTES	OK TO FILE	INSPECTOR
4-2-12	10:00						✓	ph TO Permit	✓	

	Y	N
Sprinkler System	✓	
Alarm Permit	✓	
Cooking Hood	✓	
Fire Alarm System	✓	
Standpipe System		✓
Cooking System	✓	
Bars/Wires on Windows		✓
Lock Box		✓
NFPA 901 Type		1&1
Building Const Type		3
Number of Stories		3
Posted Occupancy	160	

Permit#: 33448

Local (Central) (circle one)

APPROVED
FIRE SAFETY DIVISION

Fire Marshal

FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☐ EAST
☐ PERMIT ☐ WEST
☐ COMPLAINT/REFERRAL ☐ SPECIAL

LOCATION: _____

PERSON CONTACTED:

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	TELEPHONE#: OWNER NAME: _____ OWNER ADDRESS: _____ OWNER PHONE: _____ / NOTES	OK TO FILE	INSPECTOR

	Y	N
Sprinkler System		
Alarm Permit		
Cooking Hood		
Fire Alarm System		
Standpipe System		
Cooking System		
Bars/Wires on Windows		
Lock Box		
Posted Occupancy		

Permit#: _____

Local **Central** (circle one)

APPROVED
FIRE SAFETY DIVISION

_____
Fire Marshal

INSPECTION REPORT PERMIT MONTH: MARCH 2012

INSPECTION DATE: 4-2-12

LOCATION: 302 GOODMAN ST N 01 OWNER: SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

OCCUPANT: SAME TYPE OF OPERATION: RESTAURANT

PERSON CONTACTED: ~~ALBERT DEBLIECK~~ ARROW METEAS PHONE NO: ~~2565980~~ 284-0977 APPOINTMENT: (Y/N) ___

(CONDITIONS, SURROUNDINGS AND ARRANGEMENTS FOUND:

CODE	FEE	PERMIT	
5412B16	70	03045	OVEN OR KILN OPERATION INDUST/COMM
5412B21B	70		LPG LESS THAN 1000

Ok TO Remit

DATE VIOLATIONS ISSUED: _____ 20 ____ CORRECTED: _____ 20 ____

DATE OF APPROVAL FOR PERMIT: 4-2 20 12 SIGNATURE: _____

---------- FOR OFFICE USE ONLY ----------

DATE PERMIT ISSUED: _____ 20 ____ DATE EXPIRED: _____ 20 __

PERMIT NUMBER: _____ FEE REQD: _____ _____

302 N. Goodman St.

SALENA'S
MEXICAN
RESTAURANT

FAX:

Attention: Al Richards
Fax: 428-6785
Re: Salena's Fire inspection

From: Aaron Metras, General Manager
Phone: 256-5980

Note: updated copy of ADT alarm upgrade maintenance

SERVICE TICKET

0524UE12

Service Date: MM / DD / YY 04 06 11

Customer Number: Add customer number to check.

Job#: 57324389

Customer/ Business Name: Salenas Mexican Restaurant

Address: 302 N Goodman ST #E103

City: Rochester ST: NY Zip Code: 14607

Job Type: ☒ Commercial ☐ National Account ☐ Systems ☐ Residential ☐ Other:

Start Date: MM / DD / YY 04 06 11

Requested By: First / Last Name

Contact Name: First / Last Name

Phone Number: Area Code

Ext:

System Type:

CS#: H760024513

Service Plan:

Service Request /Special Instructions: Prog. Timer TEST - verify FA POC

H760045631

QSP / Maintenance Contract: ☐ Yes ☐ No Labor Quote: ☐ Yes ☐ No Warranty: ☐ Yes ☐ No Billable: ☐ Yes ☐ No

Work Complete?: ☐ Yes ☐ No Device(s) Disconnected: ☐ Yes ☐ No Service(s)/Device(s) Added: ☐ Yes ☐ No Devices / Services can only be added from a ride

Work Performed: VISTA 128 FBP - 2 LINE DIALER

Z1 - fire alarm - from Cust owned unit DLL - 24 HR. TEST TIMER

Z2 fire TBL - from Cust owned unit

ADT - POC ONLY FA - POC ONLY - non ADT

Cause Code: Resolution Codes: Code: Code: Code: Code: System taken off test? ☐ Yes ☐ No ☐ N/A

Enroute: HH : MM Onsite: HH : MM Cleared: HH : MM

On monitored alarm systems, I tested, and if necessary, connected the line seizure feature to ensure it is working correctly. ☐ Yes ☐ No

Technician Name: RHERDZIK Technician #: 29481

Technician Signature:

PARTS CHARGES

Qty	Part#	Price	Total Price
1	fire ALARM - POC ☐ Need to order	$	$
2	fire TBL - POC ☐ Need to order	$	$
	☐ Need to order	$	$
	☐ Need to order	$	$
	☐ Need to order	$	$
	☐ Need to order	$	$
	☐ Need to order	$	$
	☐ Need to order	$	$
	Total Parts Price (A)		$

LABOR CHARGES

Trip Charge: ☐ Yes ☐ No Trip Charge	$
Minimum Labor Charge	$
Additional Labor Charge	$
Overtime Labor Charge	$
Total Labor Price (B)	$
Less Credit or Non-Chargeable Labor	$
Subtotal Parts & Labor (A+B)	$
Tax Exempt Code#:	
Tax @ ____ %	$
Total Service Call Price	$

LABOR CALCULATION

Minimum Labor Charge: $ Labor Increment Qty: Increments Billable @: $ Total Labor Charged: $

AFTER-HOURS LABOR CALCULATION

Minimum Labor Charge: $ Labor Increment Qty: Increments Billable @: $ Total Labor Charged: $

PAYMENT INFORMATION AND CUSTOMER ACCEPTANCE

Check/Credit Amount $ Check #: Add customer number to check.

Credit Card#:

Credit Card Type: ☐ VISA ☐ MasterCard ☐ Discover ☐ AMEX ☐ MBNA

Exp Date: MM / YY PO#:

IN ACCORDANCE WITH AND SUBJECT TO ALL THE TERMS AND CONDITIONS SET FORTH IN OUR EXISTING CONTRACT/AGREEMENT IF ONE IS IN EFFECT, OTHERWISE AS SET FORTH ON THE REVERSE SIDE HEREOF.

PAYMENT IS DUE UPON COMPLETION OF WORK

Customer Signature: Date:

Print Name: Aaron Metas First / Last Name (As it appears on the credit card.)

Title:

© 2009 ADT Security Services. All rights reserv

CUSTOMER COPY

City of Rochester
FIRE DEPARTMENT

FIRE SAFETY DIVISION
185 Exchange Blvd., Suite 665
Rochester, New York 14614
(585) 428-7037

PERMIT

DATE 03/29/11

For keeping, storing, using, installing, manufacturing, handling, transporting, or otherwise employing flammable, combustible, or explosive materials, or materials, processes, or equipment, which if improperly used may produce conditions hazardous to life or property.

TO WHOM IT MAY CONCERN:
By virtue of the provisions of the Fire Prevention Code of the City of Rochester, NY.,

SALENA'S MEXICAN RESTAURANT
302 GOODMAN ST N

12-03045	PERMIT NUMBER

having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Fire Prevention Code can be observed, authority is hereby given and this PERMIT is GRANTED for:

PERMIT CODE	PERMIT CATAGORY	FEE
5412B16	OVEN OR KILN OPERATION INDUST/COMM	$ 70
5412B21B	LPG LESS THAN 1000	$ 70

Please return this part with payment.

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS ON YOUR CHECK OR MONEY ORDER

00302 GOODMAN ST N

12-03045	PERMIT NUMBER
03/29/11	INVOICE DATE
04/29/11	DUE DATE
$ 140	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

FD513

fdpmt1

THIS PERMIT EXPIRES 03/31/12

This permit does not take the place of any License required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

FIRE MARSHAL

THIS PERMIT MUST AT ALL TIMES BE KEPT ON FILE AT THE PREMISES MENTIONED ABOVE

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS ON YOUR CHECK OR MONEY ORDER

00302 GOODMAN ST N

12-03045	PERMIT NUMBER
03/29/11	INVOICE DATE
04/29/11	DUE DATE
$ 140	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

FD513

fdpmtf

Permit fee payments not received by the due date will be considered delinquent.

These delinquent properties operating with invalid permits will be subject to the issuance of a Municipal Code Violations Summons pursuant to Chapter 54-10 of the Municipal Code.

Municipal Code Summons Schedule

	Initial	Default
1st Offense, or after 30 days	$ 75.00	$150.00
2nd Offense, or after 60 days	$150.00	$300.00
3rd Offense, or after 90 days	$375.00	$750.00

FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☒ EAST
☒ PERMIT ☐ WEST
☐ COMPLAINT ☐ SPECIAL
REFERRAL

LOCATION: 302 GOODMAN ST N

Person contacted: SALENA'S MEXICAN RESTAURANT

DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
3/16/14								ok	X	ar

Telephone #:

Owner Name:
Owner Address:
Owner Phone:

	Y	N
Sprinkler System	✓	
Alarm Permit	✓	
Cooking Hood	✓	
Fire Alarm System	✓	
Standpipe System		✓
Cooking System	✓	
Bars/Wires on Windows		✓
Lock Box		✓
Posted Occupancy		✓

Permit# _____

Local (Central) (circle one) Shield,

APPROVED
FIRE SAFETY DIVISION

Al Richards
Fire Marshal

INSPECTION REPORT PERMIT MONTH: MARCH 2011

INSPECTION DATE: 3/1/

LOCATION: 302 GOODMAN ST N 01 OWNER: SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

OCCUPANT: _____ TYPE OF OPERATION: _____

PERSON CONTACTED: ALBERT DEBLIECK PHONE NO: 2565980 APPOINTMENT: (Y/N) ___

(CONDITIONS, SURROUNDINGS AND ARRANGEMENTS FOUND:

CODE	FEE	PERMIT	
5412B16	70	03040	OVEN OR KILN OPERATION INDUST/COMM
5412B21B	70		LPG LESS THAN 1000

DATE VIOLATIONS ISSUED: _____ 20 ____ CORRECTED: _____ 20 ____

DATE OF APPROVAL FOR PERMIT: 3/10/ 20 11 SIGNATURE: _____

---------- FOR OFFICE USE ONLY ----------

DATE PERMIT ISSUED: _____ 20 ____ DATE EXPIRED: _____ 20 __

PERMIT NUMBER: _____ FEE REQD: _____ _____

Lakeshore Fire Protection, Inc.

Fire Protection Specialists
845-A Maple Street
Rochester, New York 14611
585-529-3850
FAX 529-3585

13230

Customer
Salema's Mexican Rest
Village Gate
Roch.

Service Date 2/21/11
VOID 6 MONTHS FROM ABOVE DATE

SEMI-ANNUAL MAINTENANCE OF AUTOMATIC FIRE SUPPRESSION SYSTEM

SYSTEM MANUFACTURER (✓) Pyro Chem ( ) Protex ( ) Ansul ( ) Range Guard ( ) Kidde

MODEL PCL 4600 + PCL 2400 CYLINDER SIZE 4.6cpl 2.4.cpl NO. CYLINDERS 2

HYDROTEST DATE 05 ? DATE PREVIOUS SERVICE 8/10 GAUGE PSI 175

PILOT CARTRIDGE ( ) Replaced (✓) Checked ( ) N.A. Date Replaced ___/___/___

NO. OF NOZZLES Plenum 3 Duct 2 Surface 7

NO. OF FUSIBLE LINKS 5-450 360° _____ 500° _____ Replaced (✓) Yes ( ) No

REMOTE MANUAL PULL ( ) None installed ( ) None required (✓) Accessible ( ) Non accessible

NOZZLE CAPS (✓) OK Number missing 0 Number replaced 0

NOZZLES CONDITION (✓) Good ( ) Fair ( ) Poor ( ) Cleaned

CYLINDER ACCESSIBILITY (✓) Accessible ( ) Non-accessible

FUEL SHUT OFF-GAS (✓) Operational ( ) Non-operational ( ) Not required ( ) None installed

FUEL SHUT OFF-ELECTRIC ( ) Operational ( ) Non-operational (✓) Not required ( ) None installed

FIRE ALARM TIE-IN (✓) Operational ( ) Non-operational ( ) Not required ( ) None installed

HOOD CONDITION (✓) Clean ( ) Greasy

FILTER CONDITION (✓) Clean ( ) Greasy

DUCT CONDITION (✓) Clean ( ) Greasy

THIS FIRE SUPPRESSION SYSTEM MEETS CURRENT N.F.P.A. 96 REQUIREMENTS FOR FULL SURFACE PROTECTION AND FUEL SHUT OFF (✓) Yes ( ) No

SYSTEM DEFICIENCIES none

PORTABLE EXTINGUISHERS ( ) 40BC Rated Sodium Bicarb or Potassium Bicarb (✓) Yes ( ) No For Dry Chemical Systems
(✓) K-Type (✓) Yes ( ) No For Wet Chemical Systems

PORTABLE EXTS. (✓) Inspect Qty. 3 # ~~FOR RECHARGE~~ 1 K + 2 5# ABC will need hydro next time DATE _____

ANY review, recommendation, or inspection made by this company relates solely to fire insurance rating consideration. No representation or warranties of any kind are intended or made.

I, the undersigned, hereby agree that in the event of default of payment of the amount due for this inspection and if this account is placed into the hands of an agency or attorney for collection or legal action, to pay an additional charge equal to the cost of collection including agencies and attorneys fees and court costs incurred and commanded by law governing these actions in the state of New York.

TERMS: Cash or check only, (unless prior credit approval has been made with our office). A service and handling charge of 2% per month ($2.00 minimum) will be added on all invoices over 30 days (annual rate of 24%).

AUTHORIZED BY [signature] TITLE C M

Emerald Steam Cleaning Co. Corp.

1500 Walworth Penfield Road
Walworth, NY 14568

Invoice

Date	Invoice #
9/26/2010	6810

Bill To
Salina's Mexican Rest 302 N. Goodman St. Rochester, NY 14607

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
	Complete Cleaning Of Exhaust Ventilation System, including exhaust hood, ductwork, baffle filters, and exhaust fans. 09/27/2010	300.00	300.00T
	Sales Tax	8.00%	24.00
		Total	$324.00

FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☑ EAST
☑ PERMIT ☐ WEST
☐ COMPLAINT ☐ SPECIAL REFERRAL

LOCATION: 302 GOODMAN ST N

Person contacted: SALENA'S MEXICAN RESTAURANT

Telephone #:

Owner Name:
Owner Address:
Owner Phone:

DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
2/29/10	3p							rh	X	AR

	Y	N	
Sprinkler System	✓		rl
Alarm Permit	✓		
Cooking Hood	✓		
Fire Alarm System	✓		
Standpipe System		✓	
Cooking System	✓		
Bars/Wires on Windows		✓	
Lock Box		✓	
Posted Occupancy		✓	

Permit# _____

Local **Central** (circle one)

APPROVED
FIRE SAFETY DIVISION

Al Richards

Fire Marshal

INSPECTION REPORT PERMIT MONTH: MARCH 2010

INSPECTION DATE: 2/24/10

LOCATION: 302 GOODMAN ST N 01 OWNER: SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

OCCUPANT: _____ TYPE OF OPERATION: _____

PERSON CONTACTED: ALBERT DEBLIECK PHONE NO: 2565980 APPOINTMENT:(Y/N) ___

(CONDITIONS, SURROUNDINGS AND ARRANGEMENTS FOUND:

CODE	FEE	PERMIT	
5412B16	70	03038	OVEN OR KILN OPERATION INDUST/COMM ✓ ok to permit.
5412B21B	70		LPG LESS THAN 1000 ✓

Fire Plan report

Emerald
Stan C/N
(315) 980-7285
Jack Doherty

DATE VIOLATIONS ISSUED: _____ 20 ___ CORRECTED: _____ 20 ___

DATE OF APPROVAL FOR PERMIT: 2/24/ 20 10' SIGNATURE: [signature]

---------- FOR OFFICE USE ONLY ----------

DATE PERMIT ISSUED: _____ 20 ___ DATE EXPIRED: _____ 20 ___

PERMIT NUMBER: _____ FEE REQD: _____ _____

City of Rochester
FIRE DEPARTMENT

FIRE SAFETY DIVISION
185 Exchange Blvd., Suite 665
Rochester, New York 14614
(585) 428-7037

PERMIT

DATE 03/05/10

For keeping, storing, using, installing, manufacturing, handling, transporting, or otherwise employing flammable, combustible, or explosive materials, or materials, processes, or equipment, which if improperly used may produce conditions hazardous to life or property.

TO WHOM IT MAY CONCERN:
By virtue of the provisions of the Fire Prevention Code of the City of Rochester, NY.,

SALENA'S MEXICAN RESTAURANT
302 GOODMAN ST N

11-03040	PERMIT NUMBER

having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Fire Prevention Code can be observed, authority is hereby given and this PERMIT is GRANTED for:

PERMIT CODE	PERMIT CATAGORY	FEE
5412B16	OVEN OR KILN OPERATION INDUST/COMM	$ 70
5412B21B	LPG LESS THAN 1000	$ 70

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS
ON YOUR CHECK OR MONEY ORDER
00302 GOODMAN ST N

11-03040	PERMIT NUMBER
03/05/10	INVOICE DATE
04/05/10	DUE DATE
$ 140	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

FD513

fdpmt1

THIS PERMIT EXPIRES 03/31/11

This permit does not take the place of any License required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

FIRE MARSHAL

THIS PERMIT MUST AT ALL TIMES BE KEPT ON FILE AT THE PREMISES MENTIONED ABOVE

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS
ON YOUR CHECK OR MONEY ORDER
00302 GOODMAN ST N

11-03040	PERMIT NUMBER
03/05/10	INVOICE DATE
04/05/10	DUE DATE
$ 140	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

FD513

fdpmt1

Permit fee payments not received by the due date will be considered delinquent.

These delinquent properties operating with invalid permits will be subject to the issuance of a Municipal Code Violations Summons pursuant to Chapter 54-10 of the Municipal Code.

Municipal Code Summons Schedule

	Initial	Default
1st Offense, or after 30 days	$ 75.00	$150.00
2nd Offense, or after 60 days	$150.00	$300.00
3rd Offense, or after 90 days	$375.00	$750.00

City of Rochester

Fire Department
185 Exchange Boulevard, Suite 665
Rochester, New York 14614-2124

one city ROCHESTER Fire Safety Division

PERMIT

DATE REVISED: 05/06/09

For keeping, storing, using installing, manufacturing, handling, transporting, or otherwise employing flammable, combustible, or explosive materials, or materials, processes, or equipment, which if improperly used may produce conditions hazardous to life or property.

TO WHOM IT MAY CONCERN:
By Virtue of the provisions of the Fire Prevention Code of the City of Rochester, NY.,

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST

PERMIT NUMBER: 10-03038

Having made application in due form, and as the conditions, surroundings, and arrangements are, in my opinion, such that the intent of the Fire Prevention Code can be observed, authority is hereby given and this PERMIT is GRANTED for:

PERMIT CODE	PERMIT CATEGORY	FEE
5412B21B	LPG LESS THAN 1000	$ 70

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO THE CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS ON YOUR CHECK OR MONEY ORDER

Permit for Property at:
00302 N GOODMAN ST

10-03038	PERMIT NUMBER
05/06/09	REVISED DATE
06/06/09	DUE DATE
$ 70	AMOUNT DUE

PAID 5/11/09 JP

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

This permit does not take the place of any License required by law and is not transferable. Any change in the use of occupancy of premises shall require a new permit.

Fire Marshal

THIS PERMIT MUST AT ALL TIMES BE KEPT ON FILE AT THE PREMISES MENTIONED ABOVE

Please return this part with payment

MAKE YOUR CHECK OR MONEY ORDER, PAID IN FULL, PAYABLE TO THE CITY TREASURER AND MAIL TO:

ROCHESTER FIRE DEPARTMENT
ATTENTION: ACCOUNTS RECEIVABLE
185 EXCHANGE BLVD., SUITE 663
ROCHESTER, NEW YORK 14614

PLEASE WRITE PERMIT NUMBERS ON YOUR CHECK OR MONEY ORDER

Permit for Property at:
00302 N GOODMAN ST

10-03038	PERMIT NUMBER
05/06/09	REVISED DATE
06/06/09	DUE DATE
$ 70	AMOUNT DUE

SALENA'S MEXICAN RESTAURANT
302 N GOODMAN ST
ROCHESTER NY 14607

FIRE SAFETY INSPECTION RECORD

EC-8

☒ LICENSE ☐ EAST
☐ PERMIT ☐ WEST
☐ COMPLAINT ☐ SPECIAL REFERRAL

AC

LOCATION: 302 N. GOODMAN ST.

Person contacted:

Telephone #: SALONA'S

Owner Name: Mgr JASON

Owner Address:

Owner Phone:

DATE RECEIVED IN FIRE SAFETY:	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
1/12										
DATE										
1/13/09			4					4 Vio 4 ord		AC
1/21/09						3		3 Corr		AC
1/23/09						1		1 Corr	X	AC

☑ APPROVED

	Y	N
Sprinkler System	✓	
Alarm Permit	✓	
Cooking Hood	✓	
Fire Alarm System	✓	
Standpipe System		✓
Cooking System	✓	
Bars/Wires on Windows		✓
Lock Box		✓
Posted Occupancy	160	ok

Permit# _____

Local Central (circle one)

APPROVED
FIRE SAFETY DIVISION

AC Richards
Fire Marshal

Vio's

1) 2 filter replace kit hood
2) Clr report hood
3) fire Alarm report
4) comb clean to furnace

9/08 — SYST - Lakeshore
529-3850
— part. 10/08

CLS1080

Date Printed: January 12, 2009

City of Rochester
City Code License - Entertainment Center
For Application#: 8

Current Status/Date: **01/09/2009 P - Pending**

Applic. Date: **01/09/2009** Issue Date: Start Date: **02/01/2009** Expiration Date: **01/31/2010**

General Comments: **CORP PAPERS ATTACHED BROWNCROFT ENTERPRISES, INC. (585) 256-5980**

License Fee: **$475.00** ***** RENEWAL LICENSE ***** Last Chgd: **01/12/2009 szatkot**

Applicant: **ALBERT DEBLIECK** Residence: **70 QUENTIN RD**

DOB: **10/09/1948** Home Phone: **(585) 482-5626** City, State, Zip: **ROCHESTER NEW YORK 14609**

Business Name: **SALENA'S MEXICAN RESTAURANT** Business Phone **(585) 442-9061**

Business Name: village Cafe

Activity: **SERVING MEXICAN FOOD AND DRINKS**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: **GARY STERN** Residence: **38 TOBYBROOK 38 TOBYBROOK**

DOB: **05/08/1943** Home Phone: **(585) 442-9061** City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: **1071367** Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 01/09/2009** Reviewer:

3 Game Limit? **No** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date:

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **No** MCVB- **No** Cart Inspection Date: Approved: **No**

Status / Date: **W / 01/09/2009** Reviewer:

Activity Code:

Comments:

Fire Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 01/12/2009** ☑ APPROVED Reviewer: **richarda**

Occupancy: **160** Cart Inspection Date: Approved: **No**

Comments: 1/23/09

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 01/09/2009** Reviewer:

Comments:

Emerald Steam Cleaning Co. Corp.

1500 Walworth Penfield Road
Walworth, NY 14568

Invoice

Date	Invoice #
1/20/2009	5959

Bill To
Salina's Mexican Rest 302 N. Goodman St. Rochester, NY 14607

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
	Complete Cleaning Of Exhaust Ventilation System, including exhaust hood, ductwork, baffle filters, and exhaust fans. 1/19/09	290.00	290.00T
	Sales Tax	8.00%	23.20
		Total	$313.20

City of Rochester

Fire Department
185 Exchange Blvd., Ste 665
Rochester, New York 14614-2124
www.cityofrochester.gov

onecity ROCHESTER Fire Safety Division

Office of the Fire Marshal
Telephone: (585) 428-7037
Fax: (585) 428-6785

Al Richards
428-3685.

NOTICE OF VIOLATION

AND ORDER TO COMPLY

SELEN'S MEXICAN RESTAURANT
NAME

Date 1-13-09

302 GOODMAN ST. N.
ADDRESS

ROCH. N.Y. 14607
CITY, STATE, ZIP

Inspection of the premises located at ABOVE reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

NYS FIRE CODE 904.6	HOOD DUCT GREASE SHALL CLEAN, SEND - FAX REPORT ✓
NYSFC or	(TWO) FILTERS MISSING ✓ FROM HOOD
NYSFC 305.1	REMOVE COMBUSTABLES ✓ TO 36" FROM FURNACE
NYSFC 901.6	SEND OR FAX FIRE ALARM SYSTEM REPORT. ✓ on file

Received by: _____ NAME _____ TITLE _____ DATE

By Order of Fire Marshal

Fire Marshal Al Richards

DATE OF COMPLIANCE 1/23/09

Fire Marshal

FD 506

FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☐ EAST
☐ PERMIT ~~☐~~ WEST
☒ SPECIAL

LOCATION: 302 N. GOODMAN ST.

Person contacted: Telephone #:

DATE RECEIVED IN FIRE SAFETY: / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECT	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
								GM		
12/16/08			1					– fire alarm system in trouble, issued order.		MS
12/23/08										
12/30/08						1		– syst. repaired per Gary Stern - owner. Simplex came out and repaired trouble w/ ground.	X	MS

APPROVED
FIRE SAFETY DIVISION

FIRE MARSHAL

Y	N	
☐	☐	SPRINKLER SYSTEM
☐	☐	COOKING HOOD SYSTEM
☐	☐	FIRE ALARM SYSTEM
☐	☐	STANDPIPE SYSTEM
☐	☐	COOKING SYSTEM
☐	☐	BARS/WIRE ON WINDOWS

1

From: Quint 4 - RFD LT BARBETTA (Quint 4 - RFD)
To: Szatko, Thomas
Date: 12/6/2008 4:31 pm
Subject: 302 N. GOODMAN ST.

Q4 RESPONDED TO 302 N. GOODMAN (LUXURY APTS.) FOR WHAT TURNED OUT TO BE BURNT IN APT. 401. THE RUN FOR RFD ORIGINATED FROM A CALL FROM THE TENANT WHEN HIS SMOKED DETECTOR WENT OFF.

AS WE WERE LEAVING THE BUILDING VIA THE STAIR CASE ON GOODMAN ST. SIDE I NOTICED AN ALARM PANEL AT THE 1ST FLOOR EXIT INDICATING TROUBLE IN THE SYSTEM IN ZONE 5 WITH THE ALARM SWITCHED INTO THE SILENCE MODE. I USED OUR SIMPLEX KEY TO GET INTO THE BOX AND FLIPPED THE SWITCH TO ON AND THE SYSTEM SOUNDED AN AUDIBLE.

I CONTACTED THE DISPATCHER TO HAVE BUILDING REP MEET ME AT PANEL. DISPATCHER SAID THAT BUILDING REP WAS AWARE OF PROBLEM AND IT WAS JUST A BAD PANEL BOX AND THE SYSTEM WAS "WORKING".

ALARM COMPANY IS SHIELD ALARM / CARD AND PHONE # 671-0996 WAS ON BOX. THEY WERE CALLED AND WE WERE TOLD BY COMPANY THAT SYSTEM IS NOT WORKING PROPERLY AND OWNER DOESN'T WANT TO FIX DUE TO $$$$$$.

B3 WAS NOTIFIED AND I AM PASSING THIS INFO UP TO YOU FOR FURTHER INVESTIGATION.

THANKS
ANGE

ISSUE VIOLATION TO FIX TROUBLE IN ALARM PANEL

D. STERN HAS ALARM CO. COMING OUT.

CANCELLED 12/12/08

442-9061

1. + calzone
2. strikers

---

3. ddogs
4. highland
5. cigar
6. palmac

T.B.

1. G+D
2. dewons

---

3. aces
4. rhino
5. xfactor
6. legion

City of Rochester

Fire Department
185 Exchange Blvd., Ste 665
Rochester, New York 14614-2124
www.cityofrochester.gov

onecity ROCHESTER Fire Safety Division

Office of the Fire Marshal
Telephone: (585) 428-7037
Fax: (585) 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

STERN PROPERTIES
NAME

Date 12/16/08

274 N. GOODMAN ST.
ADDRESS

14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST. reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

1 901.6.1 - trouble in fire alarm system (zone 5) shall be repaired.

Received by: _____ NAME _____ TITLE _____ DATE

By Order of Fire Marshal

Fire Marshal MARK SCIANDRA

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

08:34:52 Wed Dec 17, 2008

SMDISPLY **SPECIAL MAILING MULTI-ADDRESS DISPLAY DATE:** 12/17/2008 DISPLAY

SBL NO: 106 . 840 - 0001 - 010 . 000 / 0000
OWNER: GARY I & MARCIA STERN FAMILY LIMITED PARTNERSHIP
LOCATION: 0274-302 N GOODMAN ST 14607

- - - - - ARLM SPECIAL MAILING - - - - -

GARY I & MARCIA STERN FAMILY
LIMITED PARTNERSHIP

274 N GOODMAN ST
ROCHESTER, NY 14607

- - - - - REFUSE BILLING ADDRESS - - - -

VILLAGE GATE
274 N GOODMAN ST
ROCHESTER, N Y 14607

- - WSE OWNER ADDRESS- -

GARY I & MARCIA STERN FA
0274 N GOODMAN ST N
ROCHESTER NY 14607

- - - WATER BILLING ADDR - - -

WSE OWNER ADDRESS
IS BILLING ADDRESS

- - PUREWATR BILLING ADDR - -

VILLAGE GATE SQUARE
274 N GOODMAN ST
ROCHESTER, NY 14607

- - TAX BILL PAYEE - - -

STERN GARY I/MARCIA
274 N GOODMAN ST
ROCHESTER, NY 14607

- - BIS SPECIAL MAILING- -

NOT AVAILABLE

- - - - - FUTURE USE- - - -

NNNN

PF14-TRANSFER TO WBSPEC TO VIEW ADDITIONAL WSE ADDRS'S **PF12-RETURN TO ARMXLOC**

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 | INSPECTION # 08 - 02926

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: | ADDRESS: | PHONE:
CITY: | STATE: | ZIP:

EMERGENCY CONTACT: DARYL | ADDRESS: | PHONE: 202-8706
CITY: | STATE: | ZIP:

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	240	1	2

NO ENTRY DATES:

BUSINESS NAME ROCHESTER YOUTH DEVELOPME | PHONE:
BUSINESS OWNER ROCHESTER YOUTH DEVELOPMENT
ADDRESS 302 N GOODMAN ST | ROCHESTER | NY14607
PHONE 473 9330
BUSINESS EMERGENCY JEANNE HARROD
ADDRESS 1078 HATCH RD | WEBSTER | NY14580
PHONE 671 9213

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

DISPOSITION by FIRE SAFETY:

Y	N		Y	N		Y	N	
☒	☐	SPRINKLER SYSTEM	☐	☒	FIRE/SMOKE DETECT. SYSTEM	☒	☐	SINGLE STATION SMOKE DETECTORS
☐	☒	STANDPIPE SYSTEM	☐	☒	KITCHEN HOOD EXTING. SYSTEM	☐	☒	BARS/WIRE ON WINDOWS
☒	☐	FIRE ALARM SYSTEM	☐	☒	OTHER FIRE EXTING. SYSTEM	☐	☒	LOCK BOX

OFFICER PREPARING REPORT: BRENT WASSON | COMPANY: Q01 | DISTRICT: | GROUP: 9 | DATE: 10/28/08

BUS/PROP REPRESENTATIVE: | POSITION / TITLE: office Mgr | DATE OF REINSPECTION:

FIRE SAFETY INSPECTOR: | DATE:

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 | INSPECTION # 08 - 02925

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: ONONDAEA SCHOOL OF THERAPEUTI | ADDRESS: 302 N GOODMAN ST | PHONE: C MASSAGE
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: ~~MIKE NICHOLS~~ Michelle Ames | ADDRESS: | PHONE: ~~217-9301~~ 749-5059
CITY: | STATE: | ZIP:

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	233	1	2

NO ENTRY DATES:

BUSINESS NAME: ONONDAGA SCHOOL OF THERAP PHONE:
BUSINESS OWNER: ONONDAGA SCHOOL OF THERAPEUTIC MASSAGE
ADDRESS: 302 N GOODMAN ST ROCHESTER NY 14607
PHONE: 241 0076
BUSINESS EMERGENCY: JENIFER WESTSCOTT
ADDRESS: 1960 WESTFALL RD ROCHESTER NY
PHONE: 339 0131

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☒ ☐ SPRINKLER SYSTEM	☒ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☒ SINGLE STATION SMOKE DETECTORS
☒ ☐ STANDPIPE SYSTEM	☐ ☒ KITCHEN HOOD EXTING. SYSTEM	☐ ☒ BARS/WIRE ON WINDOWS
☒ ☐ FIRE ALARM SYSTEM	☐ ☒ OTHER FIRE EXTING. SYSTEM	☐ ☒ LOCK BOX

OFFICER PREPARING REPORT: Lt Willi | COMPANY: M-4 | DISTRICT: | GROUP: 4 | DATE: 10/28/08

BUS/PROP REPRESENTATIVE: Michelle M Ames | POSITION / TITLE: Director | DATE OF REINSPECTION:

FIRE SAFETY INSPECTOR: | DATE:

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY: Q04 | INSPECTION #: 08 - 02924

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: | ADDRESS: | PHONE:
CITY: | STATE: | ZIP:

EMERGENCY CONTACT: DARYL | ADDRESS: | PHONE: 202-8706
CITY: | STATE: | ZIP:

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	541	1	2

NO ENTRY DATES:

BUSINESS NAME: MOODMAKERS BOOKS AND GIFT | PHONE:
BUSINESS OWNER: MOONMAKERS BOOKS AND GIFTS
ADDRESS: 302 N GOODMAN ST ROCHESTER NY14607
PHONE: 271 7010
BUSINESS EMERGENCY: CURTIS RIVERS
ADDRESS:
PHONE: 248 5723

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☑ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☑ ☐ SPRINKLER SYSTEM	☑ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☑ SINGLE STATION SMOKE DETECTORS
☐ ☑ STANDPIPE SYSTEM	☐ ☑ KITCHEN HOOD EXTING. SYSTEM	☐ ☑ BARS/WIRE ON WINDOWS
☑ ☐ FIRE ALARM SYSTEM	☑ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☑ LOCK BOX

OFFICER PREPARING REPORT: FF C. Hammond	COMPANY: E/M 4	DISTRICT: 3	GROUP: 4	DATE: 10/17/08
BUS/PROP REPRESENTATIVE:	POSITION / TITLE: Owner			DATE OF REINSPECTION: 10/17/08
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Es. 1

ED

FIRE SAFETY INSPECTION RECORD

Rest/Bar

☑ LICENSE ☑ EAST

☐ PERMIT ☐ WEST

☐ SPECIAL

LOCATION: SALEANS MEX Rest 302 N. Goodman St.

Person contacted:

Telephone #:

12.28.07

DATE RECEIVED IN FIRE SAFETY:

160 occupancy

DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECT	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
1/14/08								1 Lic Insp/ NVN	X	Et

☑ APPROVED

Y N

☒ ☐ SPRINKLER SYSTEM

☒ ☐ COOKING HOOD SYSTEM

☒ ☐ FIRE ALARM SYSTEM

☒ ☐ STANDPIPE SYSTEM

☒ ☐ COOKING SYSTEM

☐ ☑ BARS/WIRE ON WINDOWS

APPROVED

FIRE SAFETY DIVISION

[signature]

FIRE MARSHAL

CLS1080

Date Printed: December 28, 200

City of Rochester
City Code License - Entertainment Center
For Application#: 1 10 4m

Current Status/Date: **12/20/2007 P - Pending**

Applic. Date: **12/20/2007** Issue Date: Start Date: **02/01/2008** Expiration Date: **01/31/2009**

General Comments: JASON

License Fee: **$375.00** *** **RENEWAL LICENSE** *** Last Chgd: **12/28/2007 lovellr**

Applicant: **ALBERT DEBLIECK** Residence: **70 QUENTIN RD**

DOB: **10/09/1948** Home Phone: **(585) 482-5626** City, State, Zip: **ROCHESTER NEW YORK 14609**

Business Name: **SALENA'S MEXICAN RESTAURANT** 256-5980 Business Phone **(585) 442-9061** OFF

Business Name:

Activity: **SERVING MEXICAN FOOD AND DRINKS**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: **GARY STERN** Residence: **38 TOBYBROOK 38 TOBYBROOK**

DOB: **05/08/1943** Home Phone: **(585) 442-9061** City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: **1071367** Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 12/20/2007** Reviewer:

3 Game Limit? **No** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date:

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **Yes** MCVB- **Yes** Cart Inspection Date: Approved: **No**

Status / Date: **P / 12/28/2007** Reviewer: **bushenj**

Activity Code:

Comments:

Fire Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 12/28/2007** APPROVED Reviewer: **ferrante** EF Ferrante

Occupancy: **160** Cart Inspection Date: Approved: **No**

Comments: 1/04/08

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 12/20/2007** Reviewer:

Comments:

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 INSPECTION # 07-04031

ADDRESS GOODMAN ST N FROM / TO 302 TAX ACCT #

PROPERTY OWNER: STERN REALTY — ADDRESS: 274 N GOODMAN ST — PHONE: 442-9061
CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: ONONDAFA SCHOOL OF THERAPEUTI — ADDRESS: 302 N GOODMAN ST — PHONE: C MASSAGE
CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: ~~SHARRON LEWIS~~ — ADDRESS: 590 TARRINGTON RD — PHONE: 943-1044
CITY: ROCHESTER STATE: NY ZIP: 14609

NFPA 901 CODES	GENERAL PROPERTY USE (61)	SPECIFIC PROPERTY USE 233	STRUCTURE TYPE U	STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME ONONDAGA SCHOOL OF THERAP PHONE 241-0076
BUSINESS OWNER VAN DELIA
ADDRESS
Jenifer Westacott PHONE 241 0076
BUSINESS EMERGENCY ~~SHARRON LEWIS~~ 241-0076
ADDRESS ~~590 TARRINGTON RD~~ ROCHESTER NY14609
1960 West Fall Rd PHONE ~~943-1044~~ 339-0131

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

COMPLAINT

☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT: Capt D Peterson — COMPANY Q4 — DISTRICT — GROUP 2 — DATE 12-13-07

BUS/PROP REPRESENTATIVE: — POSITION / TITLE: Office Manage — DATE OF REINSPECTION

FIRE SAFETY INSPECTOR: — DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY 204 | INSPECTION # 07-04029

ADDRESS: GOODMAN ST. N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME | ADDRESS | PHONE
CITY | STATE | ZIP

EMERGENCY CONTACT: DARYL | ADDRESS | PHONE: 202-8706
CITY | STATE | ZIP

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	541	1	2

NO ENTRY DATES:

BUSINESS NAME HOUGHTON BOOKSHOP | PHONE 454 2900
BUSINESS OWNER HOUGHTON COLLEGE
ADDRESS | PHONE
BUSINESS EMERGENCY BARBARA BATES
ADDRESS | PHONE 567-9336 / 307 7574

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING ~~REPORT~~	COMPANY	DISTRICT	GROUP	DATE
Capt Peterson	Q4		2	12-13-07
BUS/PROP REPRESENTATIVE: Justin T Coddington	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 | INSPECTION # 07-04033

ADDRESS: GOODMAN ST N 302 | FROM / TO | TAX ACCT #

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME | ADDRESS | PHONE
CITY | STATE | ZIP

EMERGENCY CONTACT: DARYL | ADDRESS | PHONE: 202-8706
CITY | STATE | ZIP

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	2151	240	1	2

NO ENTRY DATES:

BUSINESS NAME ROCHESTER YOUTH DEVELOPME | PHONE
BUSINESS OWNER ROCHESTER YOUTH DEVELOPMENT
ADDRESS 302 N GOODMAN ST ROCHESTER NY14607
E Jeanne Hamod | PHONE 473 9330
BUSINESS EMERGENCY HILLIAM MILES
ADDRESS 1078 Hatch Rd | 671-9213
Webster NY 14580 | PHONE ~~889-9053~~

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

DISPOSITION by FIRE SAFETY:

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Capt D Peters	Q4		2	12-13-07
BUS/PROP REPRESENTATIVE: Pamela K Porter	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 | INSPECTION # 07-04030

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: | ADDRESS: | PHONE:
CITY: | STATE: | ZIP:

EMERGENCY CONTACT: DARYL | ADDRESS: | PHONE: 202-8706
CITY: | STATE: | ZIP:

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	541	1	2

NO ENTRY DATES:

BUSINESS NAME MOODMAKERS BOOKS AND GIFT PHONE 271-7010
BUSINESS OWNER MOONMAKERS BOOKS AND GIFTS
ADDRESS 302 N GOODMAN ST ROCHESTER NY14607
PHONE 271 7010
BUSINESS EMERGENCY CURTIS RIVERS
ADDRESS
PHONE 248 5723

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

DISPOSITION by FIRE SAFETY:

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT: Capt Peterson | COMPANY: Q4 | DISTRICT | GROUP: 2 | DATE: 12-13-07

BUS/PROP REPRESENTATIVE: Curtis Rivers | POSITION / TITLE | DATE OF REINSPECTION

FIRE SAFETY INSPECTOR: | DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

EC #117

FIRE SAFETY INSPECTION RECORD

Paleruo

☑ LICENSE ☐ EAST
☐ PERMIT ☐ WEST
☐ COMPLAINT ☐ SPECIAL REFERRAL

LOCATION: 302 Goodman St. N.

Person contacted:

9-21-07 DATE RECEIVED IN FIRE SAFETY:

Telephone #: (585) 256 5980

Owner Name: ALBERT DEBLIECK
Owner Address: 70 QUENTIN RD
Owner Phone: (585) 442-9061

GENERAL MANAGER JAY

DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
9/24/07							X		X	Palero

☑ APPROVED
9-25-07 RL

	Y	N
Sprinkler System	X	
Alarm Permit	X	
Cooking Hood	X	
Fire Alarm System	X	
Standpipe System		X
Cooking System	X	
Bars/Wires on Windows		X
Lock Box		X
Posted Occupancy	1160	

Permit# _____

Local (Central) (circle one)

APPROVED
FIRE SAFETY DIVISION

John Perkins
Fire Marshal

CLS1080

Date Printed: September 21, 20

City of Rochester

City Code License - Entertainment Center

For Application#: 117

Current Status/Date: **09/19/2007 P - Pending**

Applic. Date: **09/19/2007** Issue Date: Start Date: **02/01/2007** Expiration Date: **01/31/2008**

General Comments:

License Fee: **$375.00** ***** NEW LICENSE ***** Last Chgd: **09/21/2007 lilld**

Applicant: **ALBERT DEBLIECK** Residence: **70 QUENTIN RD**

DOB: **10/09/1948** Home Phone: ~~(585) 750-0750~~ 256 5980 City, State, Zip: **ROCHESTER NEW YORK 14609**

Business Name: **SALENA'S MEXICAN RESTAURANT** Business Phone **(585) 442-9061** HOME

Business Name: BUSINESS 256 5980

Activity: **SERVING MEXICAN FOOD AND DRINKS**

City Address: **302 Goodman St N** Sector: **7** Quad: **SE** NET: **D** Zip: **14607**

NON City Address: City, State, Zip:

Owner Property: Residence:

DOB: Home Phone: City, State, Zip:

Documents Presented: Health Permit: **No** Ins Appr: **No** Bond Appr: **No** Agnt Dsgn: **No**

Downtown Vendor: **No** Vend Heated Items: **No** # Worker Badges: **0**

# of Game Tags: **0** Starting Tag #: **0** Ending Tag #: **0** # of Bowling Lanes: **0**

S.O.B License Type: **0** Dancing Allowed: **Yes**

Zoning Approval CZC#: **1071367** Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 09/21/2007** Reviewer:

3 Game Limit? **No** Over 2400 sq ft? **No**

CZC not Extendable for NEXT License Renewal: CZC Status Date: **09/21/2007**

Comments:

Police Approval CR#: Applicant Contact/Date: In Person **No** By Phone **No /**

Crimal Check: Records- **No** MCVB- **No** Cart Inspection Date: Approved: **No**

Status / Date: **W / 09/19/2007** Reviewer:

Activity Code:

Comments:

Fire Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **P / 09/21/2007** ☑ APPROVED Reviewer: **palermoj** John Palermo

Occupancy: **0** Cart Inspection Date: Approved: **No**

Comments: 9/24/07

Building Approval Applicant Contact/Date: In Person **No** By Phone **No /**

Status / Date: **W / 09/19/2007** Reviewer:

Comments:

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 | INSPECTION # 07-04032

ADDRESS: GOODMAN ST N 302 | FROM / TO | TAX ACCT #

PROPERTY OWNER: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME | ADDRESS | PHONE
CITY | STATE | ZIP

EMERGENCY CONTACT | ADDRESS | PHONE: 000-0000
CITY | STATE | ZIP

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
		233	1	2

NO ENTRY DATES:

BUSINESS NAME OPEN SKY YOGA CENTER | PHONE
BUSINESS OWNER OPEN SKY YOGA CENTER
ADDRESS 302 N GOODMAN ST STE 201 ROCHESTER NY14607
PHONE 271 4220
BUSINESS EMERGENCY PRISCILLA AUCHINCLOSS
ADDRESS 62 MODELANE ROCHESTER NY14618
PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
	Business moved out. Please Delete From File				

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY RII

INSPECTION # 06-03850

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061 ~~000-0000~~
CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: | ADDRESS: | PHONE:
CITY: STATE: ZIP:

EMERGENCY CONTACT: ED SCHEMINGER | ADDRESS: 217 KINGSBORO RD | PHONE: 235-1497
CITY: ROCHESTER STATE: NY ZIP: 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	522	2	

NO ENTRY DATES:

BUSINESS NAME: DR. MICHAEL MIRAN, PHD. PHONE:
BUSINESS OWNER: DR MICHAEL MIRAN, PHD
ADDRESS: 302 N GOODMAN ST STE 303 ROCHESTER NY14607
PHONE:
BUSINESS EMERGENCY: DR. MICHAEL MIRAN
ADDRESS: 272 SYLVAN RD ROCHESTER NY14618
PHONE: 473 9770

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
	Entire 3rd Floor under Renovation				

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT: CAPT K Coppa | COMPANY: QM9 | DISTRICT: 3 | GROUP: 1 | DATE: 6/16/06

BUS/PROP REPRESENTATIVE: | POSITION / TITLE: | DATE OF REINSPECTION:

FIRE SAFETY INSPECTOR: | DATE:

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

City of Rochester

FAX (716) 428-6137
TDD/Voice 232-3260

Bureau of Buildings and Zoning
Department of
Community Development

City Hall, Room 122-B
30 Church Street
Rochester, New York 14614-1290
(716) 428-7043

August 1, 2007

Salena's Mexican Restaurant
302 N. Goodman St
Rochester, New York 14607

Re: 302 N Goodman St. - Salena's

Dear Property Owner:

Accompanying this letter are your occupancy signs for the above mentioned address. The number on the sign **160** is the maximum allowable occupancy in the establishment at one time.

It is your responsibility to maintain the signs, or an approved substitute, in good condition. If a sign has been altered a Municipal Code Violation Bureau Appearance ticket shall be issued and subsequent fines collected. If a sign is missing a fee of $25.00 will be accessed to replace it.

If you have any questions, please contact the Fire Marshal at 428-7037.

Sincerely,

Joel N. Smith, AIA
Manager of Plan Review & Bldg. Inspections

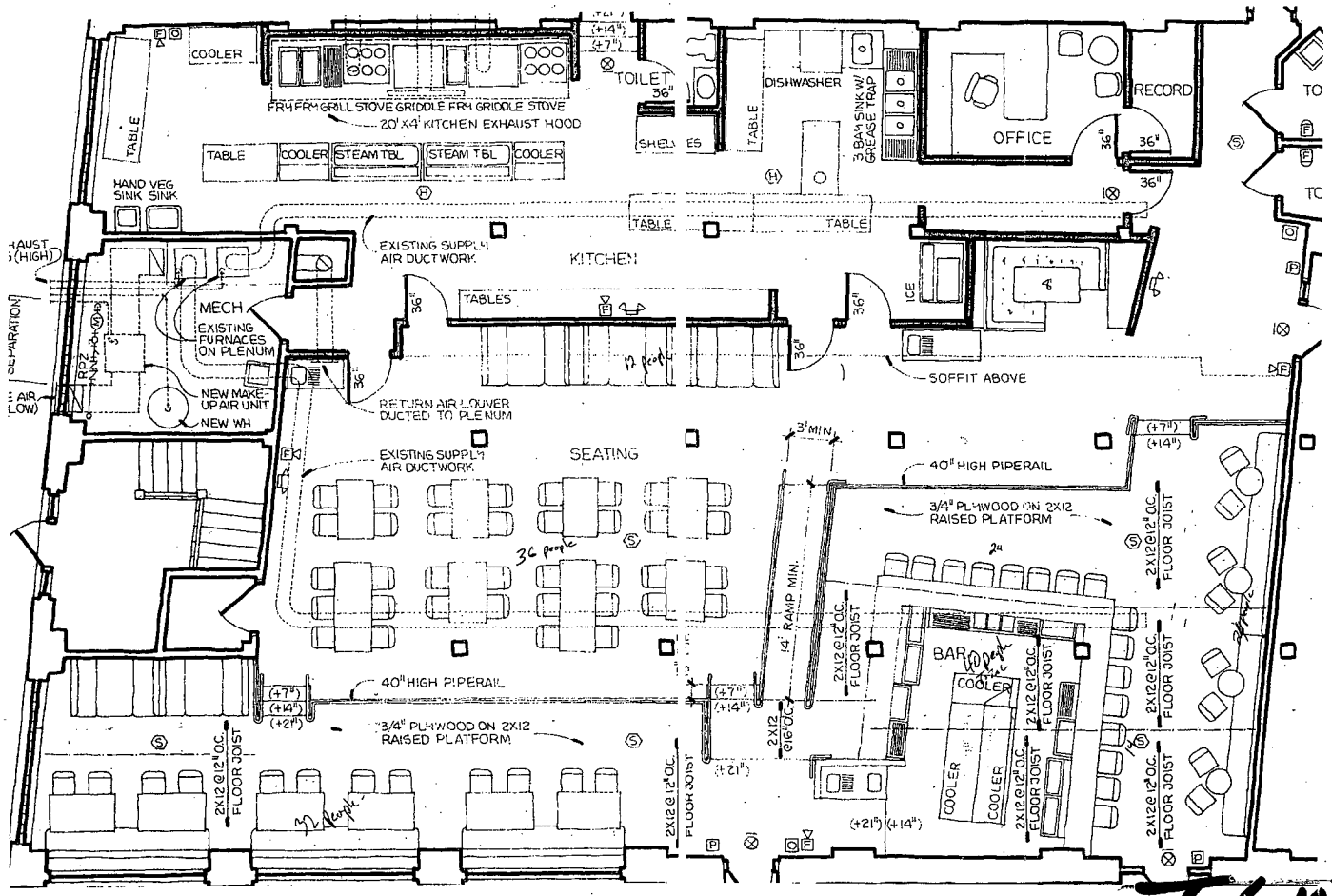
JNS/jpl

xc: City Fire Marshal
Occupancy File

EEO Employer/Handicapped

OCCUPANCY BY MORE THAN 160 PERSONS IS DANGEROUS AND UNLAWFUL

City of Rochester, New York



SALENA'S
302 N. GOODMAN ST.
1ST FLOOR – 160 PERSONS

J. C. NARES
INSPECTOR
AUG. 2007
SIGN PLACEMENT DATE

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q09

INSPECTION # 07-05692

ADDRESS GOODMAN ST N

FROM / TO ~~274~~ 302

TAX ACCT #

PROPERTY OWNER GARY I STERN
ADDRESS ~~274~~ N GOODMAN ST PHONE 442-9061
CITY ROCHESTER STATE NY ZIP 14607

MAILING NAME STERN REALTY
ADDRESS ~~274~~ N GOODMAN ST PHONE
CITY ROCHESTER STATE NY ZIP 14607

EMERGENCY CONTACT GARY I. STERN
ADDRESS 40 EVANDALE RD PHONE 461-9867
CITY ROCHESTER STATE NY ZIP 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME ONONDAGA SCHOOL OF THERAP PHONE
BUSINESS OWNER ONONDAGA SCHOOL OF THERAPEUTIC MASSAGE
ADDRESS ~~274~~ N GOODMAN ST E-200 ROCHESTER NY14607
302 MIKE NICHOLS 217-9801 PHONE 241 0070
BUSINESS EMERGENCY ~~SHARON LEWIS (C)943-1044~~ C
ADDRESS 590 TARRINGTON RD ROCHESTER NY14609
PHONE 943 1146

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☒ ☐ SPRINKLER SYSTEM	☒ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☒ SINGLE STATION SMOKE DETECTORS
☒ ☐ STANDPIPE SYSTEM	☐ ☒ KITCHEN HOOD EXTING. SYSTEM	☐ ☒ BARS/WIRE ON WINDOWS
☒ ☐ FIRE ALARM SYSTEM	☐ ☒ OTHER FIRE EXTING. SYSTEM	☐ ☒ LOCK BOX

OFFICER PREPARING REPORT: FF	COMPANY 9	DISTRICT 3	GROUP 4	DATE 7-3-2007
BUS/PROP REPRESENTATIVE: Office Manager	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(585) **428-7037**

COMPANY Q1M4 INSPECTION # 02-00296

ADDRESS N. Goodman FROM / TO 302 TAX ACCT #

PROPERTY OWNER Stern Realty ADDRESS 274 N. Goodman St PHONE 442-90[illegible]

CITY STATE ZIP 14607

MAILING NAME ADDRESS PHONE

CITY STATE ZIP

EMERGENCY CONTACT ADDRESS PHONE

CITY STATE ZIP

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	541	233	U	2

NO ENTRY DATES: 8-22

BUSINESS NAME Open Sky Yoga Center PHONE 271-~~8993~~ 4220

BUSINESS OWNER Priscilla Auchincloss

ADDRESS 302 N. Goodman St Suite E201 PHONE

BUSINESS EMERGENCY Priscilla Auchincloss

ADDRESS 62 Madeline, Roch, NY 14618 PHONE 721-4220

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

DISPOSITION by FIRE SAFETY:

Y N	Y N	Y N
☒ ☒ SPRINKLER SYSTEM	☒ ☒ FIRE/SMOKE DETECT. SYSTEM	☐ ☒ SINGLE STATION SMOKE DETECTORS
☒ ☒ STANDPIPE SYSTEM	☐ ☒ KITCHEN HOOD EXTING. SYSTEM	☐ ☒ BARS/WIRE ON WINDOWS
☒ ☒ FIRE ALARM SYSTEM	☐ ☒ OTHER FIRE EXTING. SYSTEM	☐ ☒ LOCK BOX

OFFICER PREPARING REPORT: Capt Jr Childs	COMPANY 4	DISTRICT 3	GROUP 3	DATE 12/18/06
BUS/PROP REPRESENTATIVE: X Darrell Foster	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 01/02

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(585) **428-7037**

BUILDING INSPECTION / COMPLAINT FORM

COMPANY Q/M-4 | INSPECTION # 06-00297

ADDRESS 600 GOODMAN ST N | FROM / TO 302 | TAX ACCT #

PROPERTY OWNER Stern Realty | ADDRESS 274 N. GOODMAN ST | PHONE 442-9061

CITY | STATE | ZIP 14607

MAILING NAME | ADDRESS | PHONE

CITY | STATE | ZIP

EMERGENCY CONTACT Daryl | ADDRESS | PHONE 202-8706

CITY | STATE | ZIP

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	541	4	2

NO ENTRY DATES:

BUSINESS NAME Houghton Book Shop | PHONE 2
BUSINESS OWNER Houghton College
ADDRESS | PHONE
BUSINESS EMERGENCY Barbara Bates | (585) 307-7574
ADDRESS | PHONE

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	~~X~~ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
All	Smoke Detector must be replaced (CORRECTED 12/18/06)				

Y N	Y N	Y N
~~X~~ ☐ SPRINKLER SYSTEM	☐ ~~X~~ FIRE/SMOKE DETECT. SYSTEM Missing	☐ ~~X~~ SINGLE STATION SMOKE DETECTORS
~~X~~ ☐ STANDPIPE SYSTEM	☐ ~~X~~ KITCHEN HOOD EXTING. SYSTEM	☐ ~~X~~ BARS/WIRE ON WINDOWS
~~X~~ ☐ FIRE ALARM SYSTEM	☐ ~~X~~ OTHER FIRE EXTING. SYSTEM	☐ ~~X~~ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Lt. S. Imbrigia	Q-4	3	3	8-22-06
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE OF REINSPECTION
~~X~~ Shirley M. Carini				
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 01/02

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard, Suite 665
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q/M 4 INSPECTION # 06-11744

ADDRESS N. GOODMAN FROM / TO 302 TAX ACCT #

PROPERTY OWNER Stern Realty ADDRESS 274 N. GOODMAN St PHONE 442-9061

CITY STATE ZIP 14607

MAILING NAME ADDRESS PHONE

CITY STATE ZIP

EMERGENCY CONTACT ADDRESS PHONE

CITY STATE ZIP

NFPA 901 CODES	GENERAL PROPERTY USE 541	SPECIFIC PROPERTY USE 230	STRUCTURE TYPE 1	STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME Onondaga School PHONE 241-0076
BUSINESS OWNER Van Delia
ADDRESS
PHONE
BUSINESS EMERGENCY Sharon Lewis
ADDRESS PHONE 241-0076

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☑ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☑ ☐ SPRINKLER SYSTEM	☑ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☑ SINGLE STATION SMOKE DETECTORS
☑ ☐ STANDPIPE SYSTEM	☐ ☑ KITCHEN HOOD EXTING. SYSTEM	☐ ☑ BARS/WIRE ON WINDOWS
☑ ☐ FIRE ALARM SYSTEM	☐ ☑ OTHER FIRE EXTING. SYSTEM	☐ ☑ LOCK BOX

OFFICER PREPARING REPORT: Lt. S. Imburgia	COMPANY Q4	DISTRICT 3	GROUP 3	DATE 8-22-06
BUS/PROP REPRESENTATIVE: X [signature]	POSITION / TITLE Clinic Director			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Rochester Fire Department
185 Exchange Boulevard, Suite 665
Rochester, NY 14614-2124
(585) **428-7037**

BUILDING INSPECTION / COMPLAINT FORM

COMPANY Q/M 4 INSPECTION # 04-08861

ADDRESS N. Goodman St FROM / TO 302 TAX ACCT #

PROPERTY OWNER Stern Realty ADDRESS 1274 N. Goodman St PHONE 442-9061
CITY STATE ZIP 14607

MAILING NAME ADDRESS PHONE
CITY STATE ZIP

EMERGENCY CONTACT Pary ADDRESS PHONE 202-8706
CITY STATE ZIP

NFPA 901 CODES	GENERAL PROPERTY USE 51	SPECIFIC PROPERTY USE 541	STRUCTURE TYPE 1	STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME MOODMAKERS PHONE 271-7010
BUSINESS OWNER Books and Gifts
ADDRESS
PHONE
BUSINESS EMERGENCY Curtis Rivers
ADDRESS PHONE 248-5723

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☑ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☑ ☐ SPRINKLER SYSTEM	☑ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☑ SINGLE STATION SMOKE DETECTORS
☑ ☐ STANDPIPE SYSTEM	☐ ☑ KITCHEN HOOD EXTING. SYSTEM	☐ ☑ BARS/WIRE ON WINDOWS
☑ ☐ FIRE ALARM SYSTEM	☐ ☑ OTHER FIRE EXTING. SYSTEM	☐ ☑ LOCK BOX

OFFICER PREPARING REPORT: Lt. S. Imborgia	COMPANY Q-4	DISTRICT 3	GROUP 3	DATE 8-22-06
BUS/PROP REPRESENTATIVE: Curtis R. Rivers	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY Q04 INSPECTION # 06-02480

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	

PROPERTY OWNER	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
BETWEEN FRIENDS CHILD CARE	302 N GOODMAN ST #101&102	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
~~ERIN MC INROY~~ Daryl ?	699 PARK AV #4	202-8706 747-1690
	CITY ROCHESTER STATE NY ZIP 14607	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	25	253	1	2

NO ENTRY DATES: Call + Label New Space ?

BUSINESS NAME ~~BETWEEN FRIENDS CHILD CAR~~ PHONE

BUSINESS OWNER ~~BETWEEN FRIENDS CHILD CARE~~

ADDRESS 302 N GOODMAN ST #101&102~~ROCHESTER NY14607~~

PHONE ~~244 7110~~

BUSINESS EMERGENCY ~~ERIN MC INROY 747-1690 MARIAN MC INROY~~

ADDRESS

PHONE ~~395 2917~~

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☑ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
	VACANT Space Presently				

Y N	Y N	Y N
☑ ☐ SPRINKLER SYSTEM	☑ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☑ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☑ BARS/WIRE ON WINDOWS
☑ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☑ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Lt. S. Imburgia	Q-4	3	3	8-22-06
BUS/PROP REPRESENTATIVE: Gary Stern	POSITION / TITLE Owner			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard, Suite 665
Rochester, NY 14614-2124
(585)-428-7037

COMPANY Q4 | INSPECTION # 03 09144

ADDRESS 302 N. Goodman Street | FROM / TO Suite #101 & 102 | TAX ACCT #

PROPERTY OWNER Stern Realty | ADDRESS 274 N. Goodman St | PHONE 442-9061

CITY Rochester | STATE N.Y. | ZIP 14607

MAILING NAME | ADDRESS | PHONE

CITY | STATE | ZIP

EMERGENCY CONTACT Erin Mc Inroy | ADDRESS 699 Park Ave. #4 | PHONE 747-1690

CITY Rochester | STATE N.Y. | ZIP 14607

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	25	253	1	2

NO ENTRY DATES:

BUSINESS NAME Between Friends Child Care | PHONE 244-7110

BUSINESS OWNER Erin Mc Inroy

ADDRESS 302 N. Goodman Street | PHONE

BUSINESS EMERGENCY Marian Mc Inroy | 385-2917

ADDRESS | PHONE

SPECIAL INSTRUCTIONS: occupies 1st floor

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

DISPOSITION by FIRE SAFETY:

Y N	Y N	Y N
☒ ☐ SPRINKLER SYSTEM	☐ ☒ FIRE/SMOKE DETECT. SYSTEM	☒ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☒ KITCHEN HOOD EXTING. SYSTEM	☐ ☒ BARS/WIRE ON WINDOWS
☒ ☐ FIRE ALARM SYSTEM	☒ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☒ LOCK BOX

OFFICER PREPARING REPORT		COMPANY	DISTRICT	GROUP	DATE
[signature]	FSA	Q4	3	FSA	11/15/04
BUS/PROP REPRESENTATIVE:		POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR: [signature]					DATE 11/15/04

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard, Suite 665
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY R11 | INSPECTION # 04-02151

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: GARY L. STERN | ADDRESS: 274 N. GOODMAN ST. | PHONE: 000-0000
CITY | STATE | ZIP 14607

MAILING NAME | ADDRESS | PHONE
CITY | STATE | ZIP

EMERGENCY CONTACT: ED SCHEMINGER | ADDRESS: 217 KINGSBORO RD | PHONE: 235-1497
CITY: ROCHESTER | STATE: NY | ZIP: 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	522	2	

NO ENTRY DATES:

BUSINESS NAME: DR. MICHAEL MIRAN, PHD. PHONE:
BUSINESS OWNER
ADDRESS: 302 N. Goodman ST. E303 PHONE:
BUSINESS EMERGENCY: DR. MICHAEL MIRAN
ADDRESS: 272 SYLVAN RD ROCHESTER NY 14618
PHONE: 473 9770

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				

Y N	Y N	Y N
☐ ☒ SPRINKLER SYSTEM	☒ ☐ FIRE/SMOKE DETECT. SYSTEM	☒ ☐ SINGLE STATION SMOKE DETECTORS
☒ ☐ STANDPIPE SYSTEM	☐ ☒ KITCHEN HOOD EXTING. SYSTEM	☐ ☒ BARS/WIRE ON WINDOWS
☒ ☐ FIRE ALARM SYSTEM	☐ ☒ OTHER FIRE EXTING. SYSTEM	☐ ☒ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
FF T JOHNSON	R-11	1	3	9-1-04
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

MEMBER
A.S.S.E.
N.F.P.A.
N.A.F.E.D.
S.E.D.A.

DATE: 8-9-04

Rochester Fire
EQUIPMENT CO., INC.

64 MARSHALL ST.
ROCHESTER, NY 14607
(716) 546-6765 • FAX (716) 546-6849

No.

SALES
FIRE FIGHTING SUPPLIES

SERVICE
DRY CHEMICAL
CO_2

SOLD TO

SHIP TO Bethany Friends

SHIPPED VIA	TERMS	DATE PROMISED	YOUR ORDER NO.	SERVICEMAN
				Antonio

QTY.	SIZE	DESCRIPTION	CODE	ISP	RCH	NEW	PRICE	AMOUNT
		LB CO_2 FIRE EXTINGUISHER						
		LB CO_2 FIRE EXTINGUISHER						
		LB CO_2 FIRE EXTINGUISHER						
		LB CO_2 FIRE EXTINGUISHER						
5	5 #ABC	LB DRY CHEMICAL EXTINGUISHER		✓				
		LB DRY CHEMICAL EXTINGUISHER						
		LB DRY CHEMICAL EXTINGUISHER						
		LB DRY CHEMICAL EXTINGUISHER						
		WATER PRESSURE EXTINGUISHER						
		WET CHEM						
		HALON FIRE EXTINGUISHER						
		HALON FIRE EXTINGUISHER						
		CLASS D. EXTINGUISHER						
		6 YEAR MAINTENANCE						
		6 YEAR MAINTENANCE						
		HYDRO TEST (LOW PRESSURE)						
		HYDRO TEST (HIGH PRESSURE)						
		AIR CYLINDERS						
		AIR/SCUBA TANKS						
		LB HOOD SYSTEMS						
		LB HOOD SYSTEMS						
		LB GAS STATION SYSTEMS						
		LB GAS STATION SYSTEMS						
		LB INDUSTRIAL SYSTEMS						
		1301 HALON SYSTEMS						
		FUSEABLE LINKS						
		LABOR						
		MOBILE TRUCK SERVICE						
		OUT OF TOWN SERVICE						

PARTS:

SUB TOTAL	
TAX	
SUB TOTAL	
UPS	
TOTAL	

I AM AUTHORIZED TO APPROVE THE LISTED TRANSACTION, WHICH HAS BEEN SATISFACTORILY COMPLETED. X _____

DAUSCH PLUMBING
2473 E. Ridge Road
Rochester, NY 14622

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO Stern Properties
STREET 274 N Goodmen St
CITY & STATE Rochester NY 14607

BUILDING OR LOCATION Bld 300
INSPECTOR Harry S Rapp
DATE NOV 10 2004

Owner's Section (To be answered by Owner or Occupant)

A. Explain any occupancy hazard changes since the previous inspection None
B. Describe fire protection modifications made since last inspection None
C. Describe any fires since last inspection None
D. When was the system piping last checked for stoppage, corrosion of foreign material? N A
E. When was the dry-piping system last checked for proper pitch? N A
F. Are dry valves adequately protected from freezing? N A

Inspector's Section (All responses reference current inspection)

	Yes	N.A.	No
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?	✓	✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?	✓		
c. Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?		✓	
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		✓	
c. Has the operation of the air or nitrogen supply been tested? Is it in service?		✓	
d. Were low points drained during this inspection?		✓	
e. Did quick-opening devices operate satisfactorily?		✓	
f. Did the dry valve trip properly during the trip test?		✓	
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?		✓	
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?	✓		
c. Did supervisory alarm service test satisfactorily?	✓		
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?			✓
c. Is stock of spare sprinklers available?	✓		
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

DAUSCH PLUMBING
2473 E. Ridge Road
Rochester, NY 14622

Location/System No.

10. Date dry-pipe valve trip tested (control valve partially open) N A (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open) N A (See Trip Test Table which follows.)
12. Date quick-opening device tested N A (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested N A (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.				N	A				
WITH Q.O.D.									

IF NO EXPLAIN

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	B-Fly	yes	yes	no		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: City Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test	Nov 5 2003	Main drain	2"	52 lbs	53 lbs
This Water Flow Test	Nov 10 2004	main drain	2"	55 lbs	50 lbs

16. Explain any "No" answers and comments

17. Adjustments or corrections made during this inspection:

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended:

Signature: Conrad Mypper Date: 11-10-04

Signature: [signature] Date: Nov 10 2004 *Explain "No" answers in Item #16 ‡Not Applicable

Simp exGrinnel

FIRE ALARM INSPECTION REPORT

April 2004 Inspection

PREPARED FOR

Mitchel Stern
Building Superintendant
Village Gate Square
274 North Goodman Street
Rochester, NY 14607
(716) 442-9061

05/07/2004

SimplexGrinnell

SimplexGrinnell
FIRE ALARM INSPECTION REPORT

SITE: Village Gate Square

TABLE OF CONTENTS

Test Summary	1
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SimplexGrinnell
FIRE ALARM INSPECTION REPORT

Mitchel Stern
Building Superintendant
Village Gate Square
274 North Goodman Street
Rochester, NY 14607

Thank you for choosing SimplexGrinnell as the provider of your Fire Alarm Inspection services, which were completed on May 7, 2004.

Dialer battery failed load test. Battery size is 12v, 5amp hr.

Repaired the pull station near 4th floor elevator.

Four amp fuses were being used for the signal circuit.

SIGNALS WERE NOT TESTED/SOUNDED PER REQUEST OF DARRELL FOSTER.

_____ _____
Customer Date

SITE: Village Gate Square

Monitoring Agency:	Shield
Authority Having Jurisdiction:	Rochester City Fire Department Rochester City Fire Department (716) 428-2222
Inspection Service:	SimplexGrinnell Alarm & Detection Div. 1999 Mt. Read Blvd Bldg.1 Rochester, NY 14615 Phone: (585) 475-1710 Fax: (585) 475-1898 Sales Department: (585) 475-1060 License No.: 12000035673 Service Mgr: Patrick King Service Sales: Mike Battaglia Inspector: Ken Byron Inspector: Tom Gillette

SITE: Village Gate Square

CONTROL PANEL/CENTRAL PROCESSING UNIT

Simplex 2001-8021
Serial #
Building: Village Gate Bld 302 Floor: Gnd Area: South West Stairwell

Test Performed	Result	Value	Notes
Voltage w/ Charger			
Voltage w/o Charger			
Battery % of Charge			
Battery Age Check			
Zone Trouble			
Signal Trouble			
Type Signal Circuit			
AC Input Voltage			
Earth Detection			
Lamps/LED Test			
Drill Switch			
Control Function(s)			

SITE: Village Gate Square

ALARM INITIATING DEVICES

SUMMARY TEST RESULTS

Dev. Type	Description	Total	Number Tested	Number Failed	Number Not Tested
PSD	Photo Smoke Detector	51	50	0	1
PSDA	Pull Station-Double Action	17	17	0	0
WF	Water Flow Detector	1	1	0	0

DETAIL TEST RESULTS

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
PSDA	Village Gate Bld 302	Gnd	SW Stairwell By FACP	1			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	DaycareEast Parking Lot Exit	5			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	West Courtyard Entrance	5			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	Courtyard Entrance	5			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	Lobby Entrance North	5			Tested	Passed
WF	Village Gate Bld 302	Gnd	South Courtyard Exit	WF			Tested	Passed
				Electrical Test Only/Sprinkler				
PSDA	Village Gate Bld 302	Gnd	South Courtyard Exit	5			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	Daycare Fire Exit to Courtyard	5			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	Main Entrance of Daycare	5			Tested	Passed
PSDA	Village Gate Bld 302	Gnd	Suite 102 Rear Hall Exit	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 BetweenFriends Daycare Center	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare Center	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare Hallway	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare Hallway	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare Hallway	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare NE Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare NE Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare NW Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare NW Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare SE Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare SW Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 101 Daycare SW Rm	5			Tested	Passed

SITE: Village Gate Square

ALARM INITIATING DEVICES

DETAIL TEST RESULTS

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
PSD	Village Gate Bld 302	Gnd	East Bar Area By Courtyard Door	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare SW Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare Center	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare Center	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare Hallway	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare Hallway	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare Hallway	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare NE Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare NE Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare NW Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	Suite 102 Daycare SE Rm	5			Tested	Passed
	Village Gate Bld 302	Gnd	Suite 102 Daycare SW Rm	5			Tested	Passed
PSD	Village Gate Bld 302	Gnd	In Elevator Room	E			Tested	Passed
PSD	Village Gate Bld 302	Gnd	By Elevator	E			Not Tested	
PSD	Village Gate Bld 302	2	By Elevator	E			Tested	Passed
PSD	Village Gate Bld 302	2	East Storage Room	2			Tested	Passed
PSD	Village Gate Bld 302	2	East Stairwell	2			Tested	Passed
PSD	Village Gate Bld 302	2	By Suite 200	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Reception	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Storage Room	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Hall	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Faculty Lounge	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Library	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Student Lounge	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Student Lounge	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Classroom	2			Tested	Passed
PSD	Village Gate Bld 302	2	Suite 200 Classroom	2			Tested	Passed
PSD	Village Gate Bld 302	2	Open Sky Entrance				Tested	Passed
				Head not locked on base				
PSD	Village Gate Bld 302	2	Open Sky Main Area				Tested	Passed
PSD	Village Gate Bld 302	2	Mechanical AHU Room	2			Tested	Passed
PSDA	Village Gate Bld 302	2	By Elevator	2			Tested	Passed
PSDA	Village Gate Bld 302	2	By East Stairwell	2			Tested	Passed
PSDA	Village Gate Bld 302	2	By Suite 200 Massage Therapy Entrance	2			Tested	Passed

SITE: Village Gate Square

ALARM INITIATING DEVICES

DETAIL TEST RESULTS

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
PSDA	Village Gate Bld 302	2	By West Stairwell	2			Tested	Passed
PSD	Village Gate Bld 302	3	By Elevator	E			Tested	Passed
PSD	Village Gate Bld 302	3	Suite 303	3			Tested	Passed
PSDA	Village Gate Bld 302	3	By Elevator	3			Tested	Passed
PSDA	Village Gate Bld 302	3	By South West Stairwell	3			Tested	Passed
PSD	Village Gate Bld 302	4	By Elevator	4			Tested	Passed
PSDA	Village Gate Bld 302	4	By Elevator	4			Tested	Passed
				Repaired by Inspector				
PSD	Village Gate Bld 302	4	Hall by Elev	E			Tested	Passed
PSD	Village Gate Bld 302	4	Hall by 404				Tested	Passed
PSD	Village Gate Bld 302	4	Hall by 400				Tested	Passed
[illegible]	Village Gate Bld 302	4	Meter Rm				Tested	Passed
PSDA	Village Gate Bld 302	4	By South West Stairwell	4			Tested	Passed
PSD	Village Gate Bld 302	4	Top Of West Stairwell	4			Tested	Passed
PSD	Village Gate Bld 302	4	Top Of East Stairwell By Elevator	4			Tested	Passed

SITE: Village Gate Square

SUPERVISORY DEVICES

SUMMARY TEST RESULTS

Dev. Type	Description	Total	Number Tested	Number Failed	Number Not Tested
DIAL	Telephone Dialer	1	1	1	0

DETAIL TEST RESULTS

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
DIAL	Village Gate Bld 302	Gnd	South West Stairwell				Tested	Failed
				Failed Load Test				

SITE: Village Gate Square

INSPECTION DEFICIENCIES SUMMARY

THE FOLLOWING DEFICIENCIES WERE NOTED DURING THIS INSPECTION

I. Deficiencies Covered by Your Service Agreement - Corrected by Inspection Team

None

II. Deficiencies Covered by Your Service Agreement - Service Call Required

None

III. Deficiencies Not Covered by Your Service Agreement

None

IV. Deficiencies Identified During This Inspection That Are The Customer's Responsibility

1 Telephone Dialer Failed

Customer Acknowledges responsibility for deficiencies listed above

_____ Customer

_____ Date

SITE: Village Gate Square

INSPECTION DEFICIENCIES

I. Deficiencies Covered by Your Service Agreement - Corrected by Inspection Team

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
None								

II. Deficiencies Covered by Your Service Agreement - Service Call Required

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
None								

Deficiencies Not Covered by Your Service Agreement

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
None								

IV. Deficiencies Identified During This Inspection That Are The Customer's Responsibility

Dev Type	Building	Floor	Area	Cust Zone	Cust Dev#	Address/ Zone No.	Service Performed	Test Result
DIAL	Village Gate Bld 302	Gnd	South West Stairwell				Tested	Failed
				Failed Load Test				

SITE: Village Gate Square

Customer	Date 5/7/04
Ken Byron	Date 5-7-04
Tom Gillette	Date 5-7-04

IF YOU HAVE ANY QUESTIONS REGARDING THIS REPORT, PLEASE CONTACT

Patrick King Branch Service Manager

Phone: (585) 475-1710
Fax: (585) 475-1898
Address: Alarm & Detection Div.,
1999 Mt. Read Blvd Bldg.1
Rochester, NY 14615

92318443.A04

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Rochester Fire Department
185 Exchange Boulevard, Suite 665
Rochester, NY 14614-2124
(585) **428-7037**

COMPANY 804 | INSPECTION # 04 - 05071

ADDRESS Goodman st N | FROM / TO 302 | TAX ACCT #

PROPERTY OWNER STERN Realty | ADDRESS 274 N. GOODMAN st | PHONE 442-9061
CITY | STATE | ZIP 14607

MAILING NAME Onandaga School of Therapeutic Massage | ADDRESS 302 Goodman st. N. | PHONE
CITY | STATE | ZIP 14607

EMERGENCY CONTACT Sharron Lewis | ADDRESS 943-1094 | PHONE
CITY Roch. | STATE NY | ZIP 14609

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME Onondaga School of Therapeutic Massage | PHONE
BUSINESS OWNER
ADDRESS VAN Delia
Syracuse PHONE NY
BUSINESS EMERGENCY Sharron Lewis
ADDRESS 590 Tarrington rd.
Rochester 14609 PHONE 943-1044

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B. ☐ C ☐ D				

Y N	Y N	Y N
☒ ☐ SPRINKLER SYSTEM	☒ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☒ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☒ KITCHEN HOOD EXTING. SYSTEM	☐ ☒ BARS/WIRE ON WINDOWS
☒ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☒ LOCK BOX

OFFICER PREPARING REPORT: Gregory A. Boccardo	COMPANY QM4	DISTRICT 3	GROUP 3	DATE 6/23/06
BUS/PROP REPRESENTATIVE	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 03/03

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(585) **428-7037**

COMPANY R11

INSPECTION # 02-09816

ADDRESS GOODMAN ST N FROM / TO 302 TAX ACCT #

PROPERTY OWNER ADDRESS PHONE 000-0000

CITY STATE ZIP

MAILING NAME ADDRESS PHONE

CITY STATE ZIP

EMERGENCY CONTACT ADDRESS PHONE 000-0000

CITY STATE ZIP

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME ~~PYRAMID ARTS CENTER~~ PHONE

BUSINESS OWNER

ADDRESS PHONE

BUSINESS EMERGENCY

ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
0 = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
	TENANT HAS MOVED				

DISPOSITION by FIRE SAFETY:

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT. S. MURRAY	R11	3	3	08/08/02
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 01/02

COPY TO FIRE SAFETY

FDS

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL PUBLIC ED PERMIT

HIGH-RISE X

LOCATION 302 N. Goodman St (Village Gate)

DATE	DATE RECEIVED IN FIRE SAFETY:	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTR
2/26/02		10:00	Gary Stern 442-9061	9					Alarm Test (3 floors) ① smoke heads ② Pull boxes ③ Heat heads ④ Flow Alarm		MS
3/4/02							1		- have alarm report.		
~~3/5/02~~											
3/11/02											
3/25/02							5		- all ready on 3/28		
3/28/02									Mitch - Owner's Name Home Addresss & Zip		
~~4/1/02~~									Home Phone #		
4/3/02										X	MS

3

Y	N		
☐	☐	SPRINKLER SYSTEM	REPORT - YES NO
☐	☐	COOKING HOOD SYSTEM	DATE _____
☐	☐	FIRE ALARM SYSTEM	PERMIT # _____
☐	☐	STANDPIPE SYSTEM	REPORT - YES NO
☐	☐	COOKING SYSTEM	
☐	☐	BARS/WIRE ON WINDOWS	

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION
AND ORDER TO COMPLY

VILLAGE GATE
NAME

Date 2/27/02

302 N. GOODMAN
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at SAME reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

3 1162.3b OK exit lights out shall be illuminated (2nd floor main stairway, 2nd fl. stairwell behind elevator & 4th fl. elev. lobby)

1 1163.13b OK fire extinguishers shall be inspected / tagged.

5 1163.13c & d OK fire alarm panel in trouble, shall be taken care of, local smoke detectors shall be added in rooms 408, 306, 308 & 307.

Received by: _____ NAME _____ TITLE _____ DATE

By Order of Fire Marshal

DATE OF COMPLIANCE 4/3/02

Fire Marshal MARK SCHLOSSBERG

Fire Marshal _____

FD 506

SHIELD ALARM SYSTEMS, INC.
967 FIVE MILE LINE ROAD
WEBSTER, NY 14580-2527
PHONE 671-0996 FAX 787-1556

INSPECTION AND TESTING FORM

SERVICE ORGANIZATION	PROPERTY NAME (User)
Name: SHIELD ALARM SYS,	Name: VILLAGE GATE
Addr: 967 FIVE MILE LINE RD	Addr: 302 GOODMAN STREET N.
City, State: WEB. NY 14580	City, State: ROCHESTER NY
Representative:	Owner Contact: GARY STERN
License #:	Telephone:
Telephone: 585-671-0996	

MONITORING ENTITY	APPROVING AGENCY
Contact: EMERGENCY 24	Contact:
Telephone: 1-800-877-3624	Telephone:
Monitoring Account Ref. No.:	

	TYPE TRANSMISION		SERVICE
	McCulloh		Weekly
	Multiplex		Monthly
X	Digital		Quarterly
	Reverse Priority		Semi-Annually
	Radio Frequency	X	Annually
	Other (specify)		Other (specify)

PANEL MANUFACTURER: SIMPLEX Model #:
Circuit Styles: 4+15 Number of Circuits: 10
Software Rev.: NA Last system service performed:
Last software or configuration revision:

ALARM INITIATING DEVICES AND CIRCUIT INFORMATION

QTY	CIRCUIT STYLE		SPECIAL TESTING INFORMATION
4	A	MANUAL STATIONS	
—	—	ION DETECTORS	
7	—	PHOTO DETECTORS	
—	—	DUCT DETECTORS	
—	—	HEAT DETECTORS	
—	—	WATERFLOW SWITCHES	
—	—	SUPERVISORY SWITCHES	
—	—	OTHER:	

ALARM INDICATING DEVICES AND CIRCUIT INFORMATION

QTY	CIRCUIT STYLE		SPECIAL TESTING INFOMATION
—		BELLS	
24		HORNS / STROBES	
—		CHIMES	
20		STROBES	
		SPEAKERS	
		OTHER:	
44	TOTAL NUMBER OF ALARM INDICATING CIRCUITS		YES X NO ARE CIRCUITS SUPERVISED?

SHIELD ALARM SYSTEMS, INC.
967 FIVE MILE LINE ROAD
WEBSTER, NY 14580-2527
PHONE 671-0996 FAX 787-1556

INSPECTION AND TESTING FORM

SERVICE ORGANIZATION	PROPERTY NAME (User)
Name: SHIELD ALARM SYS,	Name: VILLAGE GATE
Addr: 967 FIVE MILE LINE RD	Addr: 302 GOODMAN STREET N.
City, State: WEB. NY 14580	City, State: ROCHESTER NY
Representative:	Owner Contact: GARY STERN
License #:	Telephone:
Telephone: 585-671-0996	

MONITORING ENTITY	APPROVING AGENCY
Contact: EMERGENCY 24	Contact:
Telephone: 1-800-877-3624	Telephone:
Monitoring Account Ref. No.:	

	TYPE TRANSMISION		SERVICE
	McCulloh		Weekly
	Multiplex		Monthly
X	Digital		Quarterly
	Reverse Priority		Semi-Annually
	Radio Frequency	X	Anmually
	Other (specify)		Other (specify)

PANEL MANUFACTURER: SIMPLEX Model #: _____
Circuit Styles: A+B Number of Circuits: 10
Software Rev.: NA Last system service performed: _____
Last software or configuration revision: _____

ALARM INITIATING DEVICES AND CIRCUIT INFORMATION

QTY	CIRCUIT STYLE		SPECIAL TESTING INFORMATION
4	A	MANUAL STATIONS	
—	—	ION DETECTORS	
7		PHOTO DETECTORS	
—	—	DUCT DETECTORS	
—	—	HEAT DETECTORS	
—	—	WATERFLOW SWITCHES	
—	—	SUPERVISORY SWITCHES	
—	—	OTHER:	

ALARM INDICATING DEVICES AND CIRCUIT INFORMATION

QTY	CIRCUIT STYLE		SPECIAL TESTING INFOMATION
		BELLS	
		HORNS	
		CHIMES	
		STROBES	
		SPEAKERS	
		OTHER:	
	TOTAL NUMBER OF ALARM INDICATING CIRCUITS		YES / NO ARE CIRCUITS SUPERVISED?

SUPERVISORY SIGNAL INITIATING DEVICES AND CIRCUIT INFORMATION

QTY	CIRCUIT STYLE		COMMENTS
		Building Temp.	
		Site Water Temp.	
		Site Water Level	
		Fire Pump Power	
		Fire Pump Running	
		Fire Pump Auto Position	
N/A		Fire Pump or Pump Controller Trouble	
		Generator Running	
		Generator in Auto Position	
		Generator or Generator Controller TBL	
		Switch Transfer	
		Other:	

SIGNALING LINE **CIRCUITS** See NFPA 72 table 3-6.1 QTY: N/A Style(s): _____

SYSTEM POWER SUPPLIES

a) **Primary (Main):** Nominal Voltage 120 Amps 15
Overcurrent Protection: Type CB Amps 15
Location (Panel Number) FRONT HALL Circuit Number UKN
Disconnecting (Means) Location: UNK

b) Secondary (Standby):
24 VOLT Storage Battery: Amp-hr rating 10
Calculated capacity to operate system, in hours: X 24 _____ 60
N/A Engine-driven generator dedicated to fire alarm system:
Location of fuel storage: N/A
Type Battery ___ Dry Cell ___ Nickel Cadmium ___ Sealed Lead-Acid ___ Lead-Acid
✓ Other (specify): GEL CELL

c) **Emergency or Standby system used as a backup to primary power supply, instead of using a secondary power supply:**
___ Emergency system described in NFPA 70, Article 700
N/A ___ Legally required standby described in NFPA 70, Article 701
___ Optional standby system described in NFPA 70, Article 702, which also meets the performance requirements of Article 700 or 701.

PRIOR TO ANY AND ALL TESTING

NOTIFICATION ARE MADE:	YES	NO	WHO	TIME
Monitoring Entity	✓		EM-24	10:12
Building Occupants	✓		ALL	10:12
Building Management	✓		CARY STERN	10:12
Other (specify)				
AHJ (Notified) of any impairments				

SYSTEM TEST AND INSPECTIONS

TYPE	VISUAL	FUNCTIONAL	COMMENTS
Control Panel	✓	✓	
Interface Equip.	N/A		
Lamps/LEDs	✓	✓	
Fuses	✓	✓	
Primary Power Supply	✓	✓	
Disconnect Switches	N/A		
Ground Fault Monitoring	✓	✓	

SECONDARY POWER

TYPE	VISUAL	FUNCTIONAL	COMMENTS
Battery Condition	✓		
Load Voltage		24 VT	
Discharge Test		82.3	
Charge Test		25.8	
Specific Gravity		N/A	

Transient Suppressors			
Remote Annunciators			
Notification Appliances			
Audible	N/A		
Visual			
Speakers			
Voice Clarity			

INITIATING AND SUPERVISORY DEVICE TEST AND INSPECTIONS

LOC. & S/N	DEVICE TYPE	VISUAL CHECK	FUNCTIONAL TEST	FACTORY TEST	FACTORY SETTING	MEAS. SETTING	PASS	FAIL
SMOKE		✓	✓	✓	N/A	N/A	✓	
H/STROBE		✓	✓	✓	N/A	N/A	✓	
STROBE		✓	✓	✓	N/A	N/A	✓	
PULL		✓	✓	✓	N/A	N/A	✓	

Comments:

EMERGENCY COMMUNICATIONS EQUIPMENT

	VISUAL	FUNCTIONAL	COMMENTS
Phone Set	✓	✓	
Phone Jacks	✓	✓	
Off-Hook Indicator	✓	✓	
Amplifier(s)			
Tone Generator(s)	N/A		
Call in Signal			
System Performance			

INTERFACE EQUIPMENT	VISUAL	DEVICE OPERATION	SIMULATED OPERATION
N/A			
SPECIAL HAZARD SYSTEMS			

SPECIAL PROCEDURES:

COMMENTS:

ON/OFF PREMISES MONITORING	YES	NO	TIME	COMMENTS
Alarm Signal	✓		10:30	
Alarm Restoral	✓		10:30	
Trouble Signal	✓		10:30	
Trouble Restoral	✓		10:30	
Supervisory Signal				
Supervisory Restoral				

NOTIFICATIONS THAT TESTING IS COMPLETE

NOTIFICATION ARE MADE:	YES	NO	WHO	TIME
Monitoring Entity	✓		EM-24	10:30 AM
Building Occupants	✓		ALL	11:30 AM
Building Management	✓		GARY STERN	11:30 AM
Other (specify)				
AHJ (Notified) of any impairments				

The following did not operate correctly: _____

Who was notified of the above indicated operation problem:

_____ AHJ his/her Name: _____
_____ Owner his/her Name: _____
_____ Building Engineer his/her Name: _____
_____ Service Company Supervisor his/her Name: _____
_____ Other his/her Name: _____
Title: _____

SYSTEM RESTORED TO NORMAL OPERATION:

Date: 2/26/02 Time: 11:30 AM By: G. BLASCHEK

Signature: G. Blaschek

This testing was performed in accordance with applicable NFPA Standards.

Print Name of Inspector: G. BLASCHEK Date: 2/26/02

Signature of Inspector: G. Blaschek Time: 2/26/02

Name of Owner or Representative: _____ Date: _____

Signature of Owner or Rep.: _____ Time: _____

Frequency of routine test and inspections, if other than in accordance with the referenced NFPA standard(s):

4 Yearly

System deviations from the referenced NFPA standards(s) are:

NEED 1/0 SMOKES IN ROOMS 405/306/307/308

2nd FLOOR EXIT SIGNS NOT WORKING

_____ (signed) for Central Station or Alarm Service Company

_____ (title) _____ (date)

Upon completion of the system(s) satisfactory test(s) witnessed (if required by the authority having jurisdiction):

AHJ special comments:

_____ (signed) representative of the authority having jurisdiction

_____ (title) _____ (date)

Notes: NEED 1/0 SMOKES IN ROOMS 405/306/307/308

2nd FLOOR EXIT SIGNS NOT WORKING

3rd FLOOR EMERG LIGHT NOT WORKING

I (we), the customer (end user or representative), have: (check all that apply)

- [ ] Received a copy of the owner's manual(s) and been provided with any keys/codes needed to access any user controls
- [ ] Been shown how to use all customer functions and controls
- [ ] Been advised how to contact the monitoring station and fire department prior to testing
- [ ] Been advised who to contact for repair and maintenance service
- [ ] Been advised who to contact for new employee training relating to use of this fire alarm system
- [ ] Been advised who to contact to help you (the customer) with a false alarm reduction plan
- [ ] Been advised of required testing frequency
- [ ] Received an exact copy of this certificate of completion

_____ (signed) _____ (Print Name)

_____ (title) _____ (Date)

_____ (witness) _____ (Print Witness' Name)

City of Rochester

Fire Safety Division
Fire Department

300 Public Safety Building
Rochester, New York 14614
(716) 428-7037
(716) 428-6069 Fax

DATE: 4/1/02

302 N. GOODMAN BUILDING

TO WHOM IT MAY CONCERN:

As of this date, the Rochester Fire Department witnessed the FIRE ALARM & SPK FLOW TESTS at the premises located at 302 N. GOODMAN.

No violations were noted.

Sincerely,

Code Enforcement Officer
(716) 428-7037

(almtest)

STERN
properties
274 N. Goodman St.
DEVELOPER • OWNER
Rochester, NY 14607

April 1, 2002

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S., Room 300
Rochester, New York 14614

Attn: Mark Scialdone

Re: 302 N. Goodman Street (2-4 floors).

Dear Mark:

Per our conversation, we have installed and tested a total of 16 smoke dectectors.

Sincerely,

Gary Stern

GS/jn

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

COMPANY: R17

INSPECTION #: 01 - 06268

ADDRESS: GOODMAN ST N

FROM / TO: 302

TAX ACCT #: 005000-03 0

PROPERTY OWNER: GARY I STERN

ADDRESS: 274 N GOODMAN ST

PHONE: 442-9061

CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: STERN REALTY

ADDRESS: 274 N GOODMAN ST

PHONE:

CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: GARY I STERN

ADDRESS: 40 EVANDALE RD

PHONE: 461-9867

CITY: ROCHESTER STATE: NY ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME: SCHWARZ RALPH C & SONS IN PHONE:

BUSINESS OWNER: JAMES SCHWARZ

ADDRESS: E309 ROCHESTER NY14607

PHONE: 271 4696

BUSINESS EMERGENCY: JAMES SCHWARZ

ADDRESS: 165 GLEN ELLYN WY ROCHESTER NY14618

PHONE: 461 1239

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
	Moved to Oxford Street				
	VACANT				

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT. G. Morio	R-17	3	4	6-28-01
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE OF REINSPECTION
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 01/01

COPY TO FIRE SAFETY

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
STREET 274 N. GOODMAN ST
CITY & STATE ROCHESTER, NY 14607

BUILDING OR LOCATION BLDG A SYSTEM #1
INSPECTOR LARRY EVANS
DATE July 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection None
B Describe fire protection modifications made since last inspection None
C Describe any fires since last inspection None
D When was the system piping last checked for stoppage, corrosion or foreign material? N/A
E When was the dry-piping system last checked for proper pitch? N/A
F Are dry valves adequately protected from freezing? N/A

Inspector's Section (All responses reference current inspection)

	Yes	N.A.	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?	✓		
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?	✓		
Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?	✓		
b. Have antifreeze system solutions been tested?	✓		
c. Were the antifreeze test results satisfactory?	✓		
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip pressure test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?	✓		
b. Did the heat-responsive devices operate properly during testing?	✓		
c. Did the supervisory devices operate during testing?	✓		
8. ALARMS			
a. Did water motor and gong test satisfactorily?			✓
b. Did electric alarm test satisfactorily?	✓		
c Did supervisory alarm service test satisfactorily?	✓		
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?	✓		✓
c. Is stock of spare sprinklers available?	IN MAINT. SHOP		
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No. STERN REALTY MAIN SYSTEM #1 BLDG A

10. Date dry-pipe valve trip tested (control valve partially open) _____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open) _____ (See Trip Test Table which follows.)
12. Date quick-opening device tested N/A (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested _____ (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN N/A

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OP NO. EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Conditions
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-4"	B'FLY	YES	YES	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1, 1999	MAIN DRAIN	2"	54 lbs	37 lbs

16. Explain any "No" answers and comments: SOME SPRINKLERS ARE OUTDATED. MOST OF SPRINKLERS ARE ABOVE MELT-AWAY CEILING TILES. NO INSP TEST VALVE WAS FOUND FOR PROPER TESTING OF ALARM SYSTEM.

17. Adjustments or corrections made during this inspection: Re entered bldg on 8/27/99 & found many out dated sprinklers have been replaced where accessible at this time

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended: _____

Signature: Dave C. Morse Date: 8/27/99

Signature: Jimmy Evans Date: 7/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STEPAN REALTY & MANAGEMENT
STREET 274 N. GOODMAN ST
CITY & STATE Rochester, N.Y. 14607

BUILDING OR LOCATION Bldg. B RISER # 2
INSPECTOR LARRY EVANS
DATE July 1,

Owner's Section (To be answered by Owner or Occupant)

A. Explain any occupancy hazard changes since the previous inspection None
B. Describe fire protection modifications made since last inspection None
C. Describe any fires since last inspection None
D. When was the system piping last checked for stoppage, corrosion of foreign material? ____
E. When was the dry-piping system last checked for proper pitch? ____
F. Are dry valves adequately protected from freezing? N/A

Inspector's Section (All Responses Reference Current Inspection)

	Yes	N.A.	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?		✓	
Are they accessible and visible?		✓	
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip pressure test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?		✓	
c. Did supervisory alarm service test satisfactorily?		✓	
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?			✓
c. Is stock of spare sprinklers available?	IN MAINT SHOP		
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No.
STERN REALTY & AGENT
SYSTEM # 2. BLDG B

10. Date dry-pipe valve trip tested (control valve partially open) _____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open) _____ (See Trip Test Table which follows.)
12. Date quick-opening device tested N/A (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested _____ (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OF NO. EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	B'FLY	Yes	Yes	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1, 1999	MAIN DRAIN	2"	62 lbs	41 lbs

16. Explain any "No" answers and comments SOME SPRINKLERS ARE OUT DATED. SOME SPRINKLERS ARE PIPED WITH 1/2" PIPE. MANY SPRINKLERS ARE ABOVE MERCHANDISE AWAY CEILING TILES. NO INSP TEST VALVE WAS FOUND FOR PROPER TESTING OF ALARM SYSTEM.

17. Adjustments or corrections made during this inspection: RE ENTERED BLDG ON 8/27/99 & FOUND MANY OUT DATED SPRINKLERS HAVE BEEN REPLACED WHERE ACCESSIBLE AT THIS TIME.

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended: _____

Signature: David C. Moore Date: 8/27/99

Signature: Jerry Evans Date: 8/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
BUILDING OR LOCATION BLDG B SYSTEM #3
STREET 274 N. GOODMAN ST
INSPECTOR LARRY EVANS
CITY & STATE ROCHESTER, NY 14607
DATE July 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection None
B Describe fire protection modifications made since last inspection None
C Describe any fires since last inspection None
D When was the system piping last checked for stoppage, corrosion of foreign material? N/A
E When was the dry-piping system last checked for proper pitch? N/A
F Are dry valves adequately protected from freezing? N/A

Inspector's Section (All responses Reference current inspection)

	Yes	N.A‡	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight? Are they accessible and visible?		✓	
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip pressure test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?	✓		
b. Did electric alarm test satisfactorily?			✓
c. Did supervisory alarm service test satisfactorily?			✓
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?			✓
c. Is stock of spare sprinklers available?		IN MAINT. SHOP	
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No.
STERN REALTY & MGMT
BLDG B SYSTEM # 3

10. Date dry-pipe valve trip tested (control valve partially open)_____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open)_____ (See Trip Test Table which follows.)
12. Date quick-opening device tested N/A (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested_____ (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DELUGE & PREACTION VALVES

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	B'FLY	YES	YES	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1, 1999	MAIN DRAIN	2"	60 lbs	51 lbs

16. Explain any "No" answers and comments: SOME SPRINKLERS ARE OUT-DATED. MANY SPRINKLERS ARE PAINTED. MANY SPRINKLERS ARE ABOVE MELT AWAY CEILING TILES. NO INSP TEST VALVE WAS FOUND FOR PROPER TESTING OF ALARMS

17. Adjustments or corrections made during this inspection: RE ENTERED BLDG ON 8/27/99 & FOUND MANY OUT DATED SPRINKLERS HAVE BEEN REPLACED WHERE ACCESSABLE AT THIS TIME. ALSO, CIRCUITRY FOR SUPERVISORY FIRE ALARMS & elec bells HAS BEEN REPAIRED & IS IN WORKING CONDITION

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended:

Signature: David C. Moore Date: 8/27/99

Signature: Tony Evans Date: 7/1/99

*Explain "No" answers in Item #16 §Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT BUILDING OR LOCATION BLDG B RISER # 4

STREET 474 N. Goodman ST INSPECTOR LARRY EVANS

CITY & STATE ROCHESTER, NY 14607 DATE JULY 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A. Explain any occupancy hazard changes since the previous inspection None
B. Describe fire protection modifications made since last inspection None
C. Describe any fires since last inspection None
D. When was the system piping last checked for stoppage, corrosion of foreign material? N/A
E. When was the dry-piping system last checked for proper pitch? N/A
F. Are dry valves adequately protected from freezing? N/A

Inspector's Section (All responses relevance current inspection)

	Yes	N.A.‡	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet systems, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?			✓
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?		✓	
Are they accessible and visible?		✓	
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip pressure test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?		✓	
c. Did supervisory alarm service test satisfactorily?		✓	
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?		✓	
c. Is stock of spare sprinklers available?		✓	IN PRINT SHOP
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No. STERN REALTY Mg
BLDG B RISER #4

10. Date dry-pipe valve trip tested (control valve partially open) _____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open) _____ (See Trip Test Table which follows.)
12. Date quick-opening device tested _____ (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested _____ (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OF NO. EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	B'Fly	Yes	No	No		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: City Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1, 1999	Main Drain	2"	74 lbs	46 lbs

16. Explain any "No" answers and comments. 2B No lock on control valve. Some ceiling tiles are of the wrong type. Sprinklers in water curtains are upright, but should be pendent type. Most of sprinklers are newer, but many are over 50 years old.

17. ~~Adjustments or corrections made during this inspection~~: No insp test valve was found for proper testing of alarms.

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended: _____

Signature: David C. Moore Date: 8/27/99

Signature: Larry Evans Date: 7/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
BUILDING OR LOCATION RIDGE RISERS
STREET 274 N. GOODMAN ST
INSPECTOR LARRY EVANS
CITY & STATE ROCHESTER NY 14607
DATE JULY 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection None
B Describe fire protection modifications made since last inspection None
C Describe any fires since last inspection _____
D When was the system piping last checked for stoppage, corrosion of foreign material? _____
E When was the dry-piping system last checked for proper pitch? _____
F Are dry valves adequately protected from freezing? _____

Inspector's Section (All responses reference current inspection)

	Yes	N.A.‡	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind aisles and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?			✓
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?	✓		
Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip pressure test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?	✓		
b. Did the heat-responsive devices operate properly during testing?	✓		
c. Did the supervisory devices operate during testing?	✓		
8. ALARMS			
a. Did water motor and gong test satisfactorily?	✓		
b. Did electric alarm test satisfactorily?	✓		
c. Did supervisory alarm service test satisfactorily?			✓
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?	✓		
c. Is stock of spare sprinklers available?		IN MAINT SHOP	
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperature ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No. STERN REALT & MEAN BLDG C. RISER #5

10. Date dry-pipe valve trip tested (control valve partially open) _____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open) _____ (See Trip Test Table which follows.)
12. Date quick-opening device tested _____ (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested _____ (See Trip Test Table which follows.)

N/A

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

N/A

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1 - 6"	OSY	Yes	NO	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: City Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1 1999	Main Drain	2"	120 lbs	99 lbs

16. Explain any "No" answers and comments 2B No Lock on Control Valve. Many of Sprinklers above Melt away ceiling tiles. Some sprinklers are out dated. No insp Test Valve was found for proper testing of Alarms.

17. Adjustments or corrections made during this inspection: Re entered bldg on 8/27. found circuitry for Supervisory fire alarm & elec bell has been repaired & in working condition

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended: _____

Signature: David C. Moore Date: 8/27/99

Signature: Terry Evans Date: 7/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
BUILDING OR LOCATION Bldg C. RISER # C.
STREET 274 N. GOODMAN ST
INSPECTOR LARRY EVANS
CITY & STATE ROCHESTER NY 14607
DATE JULY 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection None
B Describe fire protection modifications made since last inspection None
C Describe any fires since last inspection None
D When was the system piping last checked for stoppage, corrosion or foreign material? N/A
E When was the dry-piping system last checked for proper pitch? N/A
F Are dry valves adequately protected from freezing? N/A

Inspector's Section (All responses refer to the current inspection)

	Yes	N.A.	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight? Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?	✓		
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?		N/A	
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?		N/A	
c. Has the operation of the air or nitrogen supply been tested? Is it in service?		N/A	
d. Were low points drained during this inspection?		N/A	
e. Did quick-opening devices operate satisfactorily?		N/A	
f. Did the dry valve trip properly during the trip pressure test?		N/A	
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?		N/A	
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?		✓	
c. Did supervisory alarm service test satisfactorily?			✓
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?		✓	
c. Is stock of spare sprinklers available?			IN MAINT SHOP
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No. STERN REALTY & MAIN BLDG C. RISER # 6

10. Date dry-pipe valve trip tested (control valve partially open) _____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open) _____ (See Trip Test Table which follows.)
12. Date quick-opening device tested _____ (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested _____ (See Trip Test Table which follows.)

N/A

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

N/A

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO OF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	OSY	Yes	Yes	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: City Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1, 1999	MAIN DRAIN	2"	135 lbs	110 lbs

16. Explain any "No" answers and comments: Some sprinklers are out dated. Some sprinklers are above meet away tiles. No insp test valve was found for proper testing of alarms.

* 17. Adjustments or corrections made during this inspection: Re entered bldg on 8/27/99. found circuitry for supervisory fire alarm & elec bell has been repaired & in working condition

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended: _____

Signature: David C. Moore Date: 8/27/99

Signature: Terry Evans Date: 7/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
BUILDING OR LOCATION Bldg C, RISER #7
STREET 274 N. GOODMAN ST
INSPECTOR LARRY EVANS
CITY & STATE ROCHESTER, NY 14607
DATE JULY 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A. Explain any occupancy hazard changes since the previous inspection None
B. Describe fire protection modifications made since last inspection None
C. Describe any fires since last inspection None
D. When was the system piping last checked for stoppage, corrosion of foreign material? 1999
E. When was the dry-piping system last checked for proper pitch? 1999
F. Are dry valves adequately protected from freezing? N/A

Inspector's Section (All responses reference current inspection)

	Yes	N.A‡	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?			✓
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?			✓
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?	✓		
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight? Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip pressure test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?			✓
c. Did supervisory alarm service test satisfactorily?			✓
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?	✓		
c. Is stock of spare sprinklers available?	✓		IN MAINT SHOP
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No.
STERN REALTY & LIGHT
Bldg C. RISER 07

10. Date dry-pipe valve trip tested (control valve partially open)_____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open)_____ (See Trip Test Table which follows.)
12. Date quick-opening device tested_____ (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested N/A (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.				N/A					

IF NO EXPLAIN

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO IF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	OSY	YES	NO	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	JULY 1, 1999	MAIN DRAIN	2"	120 lbs	110 lbs

16. Explain any "No" answers and comments. 2B. NO LOCK ON CONTROL VALVE. Some SPRINKLERS ARE OUTDATED MANY SPRINKLERS ABOVE NEAR AWAY CEILING TILES. NO INSP TEST VALVE WAS FOUND FOR PROPER TESTING OF ALARMS.

17. Adjustments or corrections made during this inspection:_____

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended:_____

Signature: David C. Moore Date: 8/27/99

Signature: Terry Evans Date: 7/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
BUILDING OR LOCATION SAME - SYSTEM # 8
STREET 274 N. GOODMAN ST
INSPECTOR LARRY EVANS & DAVID MOORE
CITY & STATE ROCHESTER NY
DATE AUG 28, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection _____
B Describe fire protection modifications made since last inspection _____
C Describe any fires since last inspection _____
D When was the system piping last checked for stoppage, corrosion of foreign material? _____
E When was the dry-piping system last checked for proper pitch? _____
F Are dry valves adequately protected from freezing? _____

Inspector's Section (All responses reference current inspection)

	Yes	N.A†	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?	✓		
c. Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?		✓	
c. Did supervisory alarm service test satisfactorily?		✓	
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?			✓
c. Is stock of spare sprinklers available?	✓		
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No. STERN REALTY, MAIN SYSTEM # 2

10. Date dry-pipe valve trip tested (control valve partially open)_____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open)_____ (See Trip Test Table which follows.)
12. Date quick-opening device tested N/A (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested_____ (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN N/A

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO IF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	OS+Y	Yes	Yes	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	AUG 23, 1999	MAIN DRAIN	2"	48 lbs	45 lbs

16. Explain any "No" answers and comments._____

17. Adjustments or corrections made during this inspection:_____

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended:_____

Signature:_____ Date:_____

Signature: Larry Evans Date: 8/28/99

*Explain "No" answers in Item #16 ‡Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT
BUILDING OR LOCATION SAME - SYSTEM # 9
STREET 274 N. GOODMAN ST
INSPECTOR LARRY EVANS
CITY & STATE ROCHESTER, NY
DATE AUG 27, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection _____
B Describe fire protection modifications made since last inspection _____
C Describe any fires since last inspection _____
D When was the system piping last checked for stoppage, corrosion of foreign material? _____
E When was the dry-piping system last checked for proper pitch? _____
F Are dry valves adequately protected from freezing? _____

Inspector's Section (All responses reference current inspection)

	Yes	N.A.	No
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?			✓
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?		✓	
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?	✓		
c. Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?		✓	
b. Have antifreeze system solutions been tested?		✓	
c. Were the antifreeze test results satisfactory?		✓	
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?		✓	
b. Did the heat-responsive devices operate properly during testing?		✓	
c. Did the supervisory devices operate during testing?		✓	
8. ALARMS			
a. Did water motor and gong test satisfactorily?		✓	
b. Did electric alarm test satisfactorily?		✓	
c. Did supervisory alarm service test satisfactorily?	✓		
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?	✓		
c. Is stock of spare sprinklers available?	IN MAINT SHOP		
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperature ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No.
STERN REALTY & MGMT
SYSTEM # 9

10. Date dry-pipe valve trip tested (control valve partially open)_____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open)_____ (See Trip Test Table which follows.)
12. Date quick-opening device tested_____ (See Trip Test Table which follows.)
13. Date deluge or preaction valve tested_____ (See Trip Test Table which follows.)

N/A

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DELUGE & PREACTION VALVES

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO IF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Sectional Control Valve							
System Control Valve	1-6"	OS+Y	Yes	Yes	No		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	AUG 27, 1999	MAIN DRAIN	2"	135	110

16. Explain any "No" answers and comments. SOME SPRINKLERS ARE OUT DATED. SOME SPRINKLERS ARE ABOVE MELT AWAY TILES. NO INSP TEST VALVE WAS FOUND.

17. Adjustments or corrections made during this inspection:

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended:

Signature:_____ Date:_____

Signature: Barry Evans Date: 8/27/99

*Explain "No" answers in Item #16 †Not Applicable

ROCHESTER SPRINKLER CORPORATION

51-57 Charlotte Street
Rochester, NY 14607
716-232-5240

Inspection Report No. _____
Conferred With _____

REPORT OF INSPECTION

Inspection Contract No. _____
Bureau File No. _____

REPORT TO STERN REALTY & MANAGEMENT BUILDING OR LOCATION 302 N. Goodman St

STREET 274 N. Goodman St INSPECTOR Larry Evans

CITY & STATE Rochester, NY DATE July 1, 1999

Owner's Section (To be answered by Owner or Occupant)

A Explain any occupancy hazard changes since the previous inspection _____
B Describe fire protection modifications made since last inspection _____
C Describe any fires since last inspection _____
D When was the system piping last checked for stoppage, corrosion of foreign material? _____
E When was the dry-piping system last checked for proper pitch? _____
F Are dry valves adequately protected from freezing? _____

Inspector's Section (All responses reference current inspection)

	Yes	N.A‡	No*
1. GENERAL			
a. Is the building occupied?	✓		
b. Are all systems in service?	✓		
c. Is there a minimum of 18 in (457mm) clearance between the top of the storage and the sprinkler deflectors?	✓		
d. In areas protected by wet system, does the building appear to be properly heated in all areas, including blind attics and perimeter areas, where accessible? Do all exterior openings appear to be protected against freezing?	✓		
e. Does the hand hose on the sprinkler system appear to be satisfactory?		✓	
2. CONTROL VALVES (See Item 14)			
a. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓		
b. Are all control valves in the open position and locked, sealed or equipped with a tamper switch?	✓		
3. WATER SUPPLIES (See Item 15)			
a. Was a water flow test of main drain made at the sprinkler riser?	✓		
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
a. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?	✓		
b. Are fire department connections in satisfactory condition, couplings free, caps in place, and check valves tight?	✓		
c. Are they accessible and visible?	✓		
5. WET SYSTEMS			
a. Are cold weather valves (O.S.&Y.) in the appropriate open or closed position?	✓		
b. Have antifreeze system solutions been tested?	✓		
c. Were the antifreeze test results satisfactory?	✓		
6. DRY SYSTEMS (See Items 10 to 14)			
a. Is the dry valve in service?			
b. Are the air pressure and priming water level in accordance with the manufacturer's instructions?			
c. Has the operation of the air or nitrogen supply been tested? Is it in service?			
d. Were low points drained during this inspection?			
e. Did quick-opening devices operate satisfactorily?			
f. Did the dry valve trip properly during the trip test?			
g. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?			
7. SPECIAL SYSTEMS - as defined in Section 1-3 (See Item 13)			
a. Did the deluge or pre-action valves operate properly during testing?	✓		
b. Did the heat-responsive devices operate properly during testing?	✓		
c. Did the supervisory devices operate during testing?	✓		
8. ALARMS			
a. Did water motor and gong test satisfactorily?	✓		
b. Did electric alarm test satisfactorily?	✓		
c. Did supervisory alarm service test satisfactorily?	✓		
9. SPRINKLERS			
a. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓		
b. Are sprinklers over 50 years old, thus requiring sample testing?	✓		
c. Is stock of spare sprinklers available?			IN MAINT SHOP
d. Does the exterior condition of sprinkler system appear to be satisfactory?	✓		
e. Temperature. Are sprinklers of proper temperatures ratings for their location?	✓		

REPORT OF INSPECTION

ROCHESTER SPRINKLER CORPORATION
51-57 Charlotte Street
Rochester, NY 14607

Location/System No.
STERN REALTY, MGMT
302 N. GOODMAN

10. Date dry-pipe valve trip tested (control valve partially open)_____ (See Trip Test Table which follows.)
11. Date dry-pipe valve trip tested (control valve fully open)_____ (See Trip Test Table which follows.)
12. Date quick-opening device tested N/A (See Trip Test Table which follows.)
13. Date deluge or preartion valve tested_____ (See Trip Test Table which follows.)

TRIP TEST TABLE

DRY VALVE

MAKE - YEAR	MODEL	SERIAL NO.	Q.O.D. MAKE - YEAR	MODEL	SERIAL NO.

DRY PIPE OPERATING TEST

	TIME TO TRIP THRU TEST PIPE		WATER PRESSURE	AIR PRESSURE	TRIP POINT AIR PRESSURE	TIME WATER REACHED TEST OUTLET		ALARM OPERATED PROPERLY	
	MIN	SEC	PSI	PSI	PSI	MIN	SEC	YES	NO
WITHOUT Q.O.D.									
WITH Q.O.D.									

IF NO EXPLAIN

DELUGE & PREACTION VALVES

OPERATION [ ] PNEUMATIC [ ] ELECTRIC [ ] HYDRAULIC

PIPING SUPERVISED [ ] YES [ ] NO DETECTING MEDIA SUPERVISED [ ] YES [ ] NO

DOES VALVE OPERATE FROM THE MANUAL TRIP AND/OR REMOTE CONTROL STATION [ ] YES [ ] NO

IS THERE AN ACCESSIBLE FACILITY IN EACH CIRCUIT FOR TESTING [ ] YES [ ] NO IF NO, EXPLAIN

MAKE	MODEL	DOES EACH CIRCUIT OPERATE SUPERVISION LOSS ALARM		DOES EACH CIRCUIT OPERATE VALVE RELEASE		MAXIMUM TIME TO OPERATE RELEASE	
		YES	NO	YES	NO	YES	NO

14. CONTROL VALVE MAINTENENCE TABLE

Control Valves	Number	Type	Open	Secured	Closed	Signs	Explain Abnormal Condition
City Connection Control Valve							
Tank Control Valve							
Pump Control Valve							
Secuonal Control Valve							
System Control Valve	1 - 6"	B'FLY	YES	YES	NO		
Other Control Valve							

15. WATER FLOW TEST AT SPRINKLER RISER

Water Supply Source: (City) Tank Pump

	Date	Test Pipe Location	Size Test Pipe	Static Pressure	Residual (Flow) Pressure
Last Water Flow Test					
This Water Flow Test	July 1, 1999	MAIN DRAIN	2"	78 lbs	71 lbs

16. Explain any "No" answers and comments 4B. Need to Replace 1 Fire Dept cap
piping in N. Stairway has been disconnected.

17. Adjustments or corrections made during this inspection:

18. Although these comments are not the result of an engineering review, the following desirable improvements are recommended:

Signature:_____ Date:_____
Signature: Larry Evans Date: 7/1/99

*Explain "No" answers in Item #16 ‡Not Applicable

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY R17 | INSPECTION # 11536

ADDRESS: Goodman Street N. | FROM / TO: 302 | TAX ACCT #:

PROPERTY OWNER: STERN REALITY | ADDRESS: 274 N. GOODMAN ST. | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: GARY STERN | ADDRESS: 274 N. GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY STERN | ADDRESS: 90 KENDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME: ONondaga SHOOl OF THerapeutic Messge Inc. | PHONE:
BUSINESS OWNER: Suite 200
ADDRESS:
PHONE:
BUSINESS EMERGENCY: Priscilla Villeneuva - (716) - 241-3985
ADDRESS: 314-6077
PHONE:

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO Violation at this time				
	ONONDAGA SCHOOL OF THERAPEUTIC MASSAGE				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT: F.F. [illegible] | COMPANY: R17 | DISTRICT: 3 | GROUP: 4 | DATE: 6/5/01

BUS/PROP REPRESENTATIVE: [signature] | POSITION / TITLE: Owner | DATE: 6/5/01

FIRE SAFETY INSPECTOR: | DATE:

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 INSPECTION # 00 - 01310

ADDRESS 302 FROM/TO 274 GOODMAN ST N TAX ACCT # 005000-03-0

PROPERTY OWNER: GARY I STERN — ADDRESS: 274 N GOODMAN ST — PHONE: 442-9061
CITY ROCHESTER STATE NY ZIP 14607

MAILING NAME: STERN REALTY — ADDRESS: 274 N GOODMAN ST
CITY ROCHESTER STATE NY ZIP 14607

EMERGENCY CONTACT: GARY I STERN — ADDRESS: 40 EVANDALE RD — PHONE: 461-9867
CITY ROCHESTER STATE NY ZIP 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	549	2	2

NO ENTRY DATES:

BUSINESS NAME PYRAMID ARTS CENTER PHONE
BUSINESS OWNER
ADDRESS E204
PHONE
BUSINESS EMERGENCY ELIZBETH DUFFY (HOME 262-3356)
ADDRESS NEW PHONE 461 2222

SPECIAL INSTRUCTIONS: INFORMATION
SPECIAL HARZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME ☐ A ☐ B ☐ C ☐ D				
	NO LONGER OPERATING AT THIS LOCATION				

Y N	Y N	Y N
☐ ☐ SPRINKLER SYSTEM	☐ ☐ FIRE/SMOKE DETECT. SYSTEM	☐ ☐ SINGLE STATION SMOKE DETECTORS
☐ ☐ STANDPIPE SYSTEM	☐ ☐ KITCHEN HOOD EXTING. SYSTEM	☐ ☐ BARS/WIRE ON WINDOWS
☐ ☐ FIRE ALARM SYSTEM	☐ ☐ OTHER FIRE EXTING. SYSTEM	☐ ☐ LOCK BOX

OFFICER PREPARING REPORT: LT. S. MURRAY — COMPANY A1 — DISTRICT 3 — GROUP 3 — DATE 09/08/00

BUS/PROP REPRESENTATIVE: — POSITION / TITLE — DATE OF REINSPECTION

FIRE SAFETY INSPECTOR: — DATE

FD 501 REV. 2/00

COPY TO FIRE SAFETY

2PM
8/1/00
LT. DJG

FIRE SAFETY INSPECTION RECORD

176 ANDERSON
~~176 N. GOODMAN ST~~

☐ LICENSE
☐ PERMIT

LOCATION: 302 N. GOODMAN ST. VILLAGE GATE ■ SPECIAL

PERSON CONTACTED: GARY BLASHER TELEPHONE #: 370-1985P/671-0996

A-T

GARY STENN-442-9061

DATE RECEIVED IN FIRE SAFETY 7/28/00 DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
7/31/00	10 A.M.	— RESCHEDULE —								
8/1/00	2 P.M.							— CHECK PULL BOX —		
								— 302 N. GOODMAN ST		
								AT. O.K. FLOW NOT		
		8	11	00				H_2O OFF?		
X	NEED TO									
	CHANGE FLOW							— 176 N. GOODMAN ST.		
	SWITCH							— 176 ANDERSON AVE		
XX	RETEST							AT - 1 ZONE NOT WORKING —		
	FLOWS.							H_2O OFF? FLOW NOT		
								— RESCHEDULE —		
								CALL DISPATCHER		
								INFORM H_2O OFF —		
								— HOLD —		
								— SYSTEM (SPRK.)		
								BACK-UP		
8/11/00	10 A.M.				OK			X RETARD CHAMBER X		
								— DOWN STAIRS		
								8/11/00 LT DJG		
								— UP STAIRS.		
								8/11/00 NOT.		
8-22	2:00									

+467-1331

1 SW 276 9292

176 = Anderson
Hudson

City of Rochester

Fire Safety Division
Fire Department

300 Public Safety Building
Rochester, New York 14614
(716) 428-7037
(716) 428-6069 Fax

DATE: AUG 23, 2005

TO WHOM IT MAY CONCERN:

1st FLOOR - 4th

As of this date, the Rochester Fire Department witnessed the ALARM TEST

at the premises located at 302 N. GOODMAN ST.

No violations were noted.

Sincerely,

Code Enforcement Officer
(716) 428-7037

(alrmtest)

STATE OF NEW YORK COUNTY OF MONROE CITY OF ROCHESTER

ROCHESTER FIRE DEPARTMENT SUPPORTING DEPOSITION CODE ENFORCEMENT/FIRE SAFETY DIVISION

Date: 5-16-2000

Time: 2:45

DEPONENT'S NAME: Gary STERN

ADDRESS/COMPANY: 274 N. Goodman

BUSINESS PHONE: (716) 442-9061

DEPOSES AND SAYS THAT AT ABOUT 2:24 A.M. P.M. ON 5-16-2000

Incident number:

Address:

Apt. #:

Location of violation(s): 302 N. Goodman

To my knowledge all Tenets on 4th Floor 302 Goodman have vacated their spaces, There are still some spaces That have clothes & personal items, We have changed Locks for entry into This area. To Retrieve This items they Must come to office at 274 N. Goodman. & will be escorded. in & out

RECEIVED ROCHESTER FIRE DEPT. 00 MAY 16 PM 3:07

NOTICE: ANY FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW.

Witness Signature

Deponents Signature

FD 120

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

Gary I & Marcia Stern Family Limited Partnership (NAME) Date 05-16-2000

274 N. Goodman St (ADDRESS)

Rochester, NY 14607 (CITY, STATE, ZIP)

Inspection of the premises located at 302 N. Goodman St. reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

Upon vacating the 4th floor premises/residences, that entire floor shall be secured against entry by any person(s).

RECEIVED
ROCHESTER FIRE DEPT.
00 MAY 16 PM 3:07

Received by: [signature] (NAME) Owner (TITLE) 5-16-2000 (DATE)

By Order of
Fire Marshal

Fire Marshal [signature]

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

ROCHESTER FIRE DEPARTMENT SUPPORTING DEPOSITION CODE ENFORCEMENT/FIRE SAFETY DIVISION

STATE OF NEW YORK COUNTY OF MONROE CITY OF ROCHESTER

Date: 5-16-2000

Time: 2:45

DEPONENT'S NAME: GARY STERN

ADDRESS/COMPANY: 274 N. Goodman

BUSINESS PHONE: (716) 442-9061

DEPOSES AND SAYS THAT AT ABOUT 2:24 A.M. (P.M.) ON 5-10-2000

Incident number:

Address:

Apt. #:

Location of violation(s): 302 N. Goodman

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K. O. Eastland
Witness Signature

Gary Stern
Deponents Signature

FD 120

OFFICE COPY

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

Gary I & Marcia Stern Family Limited Partnership Date 05-16-2000
NAME

274 N. Goodman St
ADDRESS

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CITY, STATE, ZIP

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00 MAY 16 PM 3:07

Received by: Gary Stern
NAME

Owner
TITLE

5-16-2000
DATE

By Order of
Fire Marshal

Fire Marshal

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

OFFICE COPY

TOTAL P.01

Stern Realty & Management Co.

274 N. GOODMAN STREET ROCHESTER, NEW YORK 14607
(716) 442-9061 FAX (716) 760-2394

May 12, 2000

2000 MAY 15 AM 10:58

City of Rochester
Office of the Commissioner
City Hall, Room 125-B
30 Church Street
Rochester, New York 14614

Attn: John R. Accorso:

Note: He has been INFORMED 20' IS The Dead End Line For Assembly (C5) occupancy ∴ They Must Go!

Dear John:

You must be aware of the many inspections taking place at 302 North Goodman Street, by the City Building Department, the Fire Department, and the NET Offices. I am in the process of vacating all commercial spaces on the 2nd and 3rd floors that do not meet the 50- foot requirement. Some of these tenants have been here for over 17 years. I am asking for a little time (30 days) in changing these spaces. For example, Pamela White ends her dance classes on June 8th. Her space is 3 feet beyond the 50- footmark and has a fire escape outside one of her windows. I hope this time table will be acceptable and that your department can issue a permit, with limitations, to build the Onondaga School, which will take 30-60 days to complete. Onondaga is a good client, a business that will benefit both Rochester and Village Gate.

I would like to briefly go over the events that have taken place since submission of prints for the Onondaga School and the last five days. We have sent termination notices to all 4th floor tenants. The sprinkler and alarm systems were tested under supervision of the Fire Department. We have complied with list of violations from the Fire Department, and have had several meetings with Building Department Personnel concerning notice orders and violations. All these items have been corrected except for the vacate order on the 4th floor, which is in progress and tenants should be out very soon. They are having difficulty finding open apartments in the neighborhood.

It has always been my intent to upgrade the Village Gate Square facility and I believe you have seen this over the past 19 years. I have always followed the spirit and intent of the law. I would hope that the City would engage this same attitude and follow the intent of the law and within certain parameters, the letter of the law with a developer who has been making a difference in the City of Rochester.

This has been an interesting week for me beginning with the high of being awarded a great project from the City then followed by the low of having the City reprimand me. This, I assure you, has taken a toll on me. I hope that in the years to come our working relationship will improve.

Sincerely,

Gary Stern

Gary Stern

GS/jn

C: Commissioner, Tom Argust
C: Mayor William A. Johnson, Jr

Post-it® Fax Note 7671	Date 5/15	# of pages ▶
To Amy Nichols	From Kurt Martin	
Co./Dept. Law Dept.	Co. Buildings	
Phone #	Phone # 428-7814	
Fax # 428-6950	Fax # 428-6184	

MAY-15-2000 15:08 FROM CITY OF ROCH/BLDG PERMITS TO 6950 P.01

City of Rochester

FILE

OFFICE OF THE FIRE MARSHAL
Fire Safety Division

300 Public Safety Building
150 South Plymouth Avenue
Rochester, New York 14614
(716) 428-7037
(716) 428-6785 FAX

May 15, 2000

To: All Residents, 4th Floor, 302 North Goodman Street, Rochester, New York

Subj: **Order to Vacate Residential Occupancy Use of Premises at 302 North Goodman Street, Rochester, New York.**

Dear Sir/Madam:

On May 5, 2000, the City of Rochester Building Department Ordered the building's owner(s) to immediately vacate the 4th floor residential use of the premises at 302 North Goodman Street, Rochester, New York.

The 4th floor of 302 North Goodman Street, Rochester, New York was improperly established as a residential tenancy and does not have a valid Certificate of Occupancy that establishes residential use of the building's 4th floor. Without a valid Certificate of Occupancy, it is unlawful to occupy a premises for residential purposes.

No Certificate of Occupancy was issued for residential use of the 4th floor of 302 North Goodman Street because the premises lacked the minimum required egress capability (additional stairway). Egress capability is a life safety concern and it is a minimum building safety requirement established by the New York State Uniform Fire Prevention and Building Code.

The conditions that were necessary to obtain a Certificate of Occupany to permit residential use of the 4th floor premises were clearly established by the New York State Uniform Fire Prevention and Building Code Board of Review in a *Varience* that was issued to the owner(s) of the premises. The *Varience* was never complied with. Therefore, residential use of the 4th floor premises at 302 North Goodman Street, Rochester, New York, was never legally established.

Unfortunately, until the additional egress capabilty is established, the 4th floor is not permitted for residential use and shall be immediately vacated.

I understand your frustration and I recognize the adverse impact, both financially and emotionally, that you face as a result of having entered into your lease or rental agreement. But, as the Fire Marshal of the City of Rochester, I am obligated under law to ensure that violations that impact public fire safety are immediately abated.

I am asking your cooperation in abating this difficult and dangerous condition.

For a fire safe community,

Reynaldo E. Tovar, Deputy Fire Chief
Fire Marshal

FIRE SAFETY INSPECTION RECORD

☐ LICENSE
☐ PERMIT
■ SPECIAL

LOCATION: 302/274 N. GOODMAN

PERSON CONTACTED: TOM/VIN

TELEPHONE #'S: 442/9061

WALK-THRU

W/ JOEL SMITH

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
6/28/00	11 A.M.									
								NOTE:		
								SPRINKLERS ARE		
								BEING UP GRADED.		
								THEY ARE EXISTING.		

Stern Realty & Management Co.

274 N. GOODMAN STREET ROCHESTER, NEW YORK 14607
(716) 442-9061 FAX (716) 760-2394

May 18, 2000

City of Rochester
Municipal Code Violations Bureau
42 South Avenue
Rochester, New York 14604-1794

Re: Tickets # 205156 & 205157 (Copies Enclosed)

To Whom It May Concern:

We are requesting that the appearance date with respect to the referenced tickets be rescheduled as I will be out of the country on 5/24/00. Would you kindly reschedule this date for some time after 6/7/00?

If you have any questions concerning this matter, please contact Jean Sak in my office at 442-9061.

Thank you for your attention to my request.

Sincerely,

Stern Realty & Management Co.

Gary Stern

Enclosure

GS/js

cc: Lt. O.D. Eisenhart, City of Rochester Fire Department

RECEIVED
ROCHESTER FIRE DEPT.
00 MAY 22 AM 10:24

202964 PAD BUSINESS FORMS, INC., ROCHESTER, NY 751828

205157 COMPLAINT / INFORMATION

THE PEOPLE OF THE STATE OF NEW YORK -VS-

STERN GARY I & MARCIA

Last Name (Defendant) First M.I.

274 N. GOODMAN ST

Street Address Apt. #

ROCHESTER NY 14607

City State Zip

/ / D.O.B. Sex Summons Issued To

LICENSE INFORMATION

License # Exp Date / /

☐ Amusement Center ☐ Entertainment Center ☐ Alarm Permit

☐ Taxi Driver ☐ Solicitor/Vendor ☐

☐ Dog: Color

Breed (M) (F)

VEHICLE DESCRIPTION

Year Make Type Color MV Reg# Hack Plt#

PERSON ABOVE IS CHARGED AS FOLLOWS:

302 N. GOODMAN ST

Place of Occurrence Rochester, Monroe Co., N.Y.

5/4/00 11 A.M./P.M.

Date Time

OFFENSE NO CERTIFICATE OF OCCUPANCY

In violation of Chapter 9NYCRR SEC 1300.1 SUB ORDER 126.C of the Code of the City of Rochester, N.Y.

FACTUAL PART: The above named defendant did on the stated date, time and place

NO DWELLING UNITS SHALL BE OCCUPIED IN WHOLE OR PART UNTIL THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY

PERSON ABOVE IS SUMMONED TO APPEAR AT:

☒ MUNICIPAL CODE VIOLATIONS BUREAU
42 South Ave., Rochester, N.Y.

☐ CITY COURT PART I (MISD'S)
150 S. Plymouth Ave., Rochester, N.Y.

☐ CITY COURT PART V (VIOL'S, FEL'S)
150 S. Plymouth Ave., Rochester, N.Y.

APPEARANCE DATE: 5-24 day of 19 00

at 9 A.M. / P.M.

FINE SCHEDULE: A (B) C D E DOG REFUSE ALARM

FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW

COMPLAINANT LT. EISENHART 5/5/00 Date

ID # 6579 SEC RFD

REV 10/95 G.O. 565

202964 PAD BUSINESS FORMS, INC., ROCHESTER, NY 751828

205156 COMPLAINT / INFORMATION

THE PEOPLE OF THE STATE OF NEW YORK -VS-

STERN GARY I & MARCIA

Last Name (Defendant) First M.I.

274 N. GOODMAN ST

Street Address Apt. #

ROCHESTER NY 14607

City State Zip

/ / D.O.B. Sex Summons Issued To

LICENSE INFORMATION

License # Exp Date / /

☐ Amusement Center ☐ Entertainment Center ☐ Alarm Permit

☐ Taxi Driver ☐ Solicitor/Vendor ☐

☐ Dog: Color

Breed (M) (F)

VEHICLE DESCRIPTION

Year Make Type Color MV Reg# Hack Plt#

PERSON ABOVE IS CHARGED AS FOLLOWS:

302 N. GOODMAN ST

Place of Occurrence Rochester, Monroe Co., N.Y.

5/4/00 11 A.M./P.M.

Date Time

OFFENSE SPRINKLER SYSTEM SHUT DOWN

In violation of Chapter 9NYCRR SEC 193 SUB 1A of the Code of the City of Rochester, N.Y.

FACTUAL PART: The above named defendant did on the stated date, time and place

HARRY RAPP STATED TO ME SPRINKLER SYSTEM HAS BEEN SHUT DOWN FOR APPROX. 2 WEEKS - NO NOTIFICATION WAS MADE TO THE FIRE DEPT.

PERSON ABOVE IS SUMMONED TO APPEAR AT:

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42 South Ave., Rochester, N.Y.

☐ CITY COURT PART I (MISD'S)
150 S. Plymouth Ave., Rochester, N.Y.

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COMPLAINANT LT. EISENHART 5/5/00 Date

ID # 6579 SEC RFD

REV 10/95 G.O. 565

City of Rochester

Rochester, NY
All-America City
1998

FAX (716) 428-6137
TDD/Voice 232-3260

Office of
The Commissioner
Department of
Community Development

City Hall, Room 125-B
30 Church Street
Rochester, New York 14614-1290
(716) 428-6550

May 16, 2000

RECEIVED
ROCHESTER FIRE DEPT.
00 MAY 18 AM 9:08

Mr. Gary Stern
Stern Realty and Management Company
274 North Goodman Street
Rochester, New York 14607

RE: 302 North Goodman Street

Dear Gary:

I am in receipt of your letter of May 12, 2000 regarding the tenancy of 302 North Goodman Street.

Your letter specifically requests an additional 30 days to vacate space which in essence has been illegally occupied. Unfortunately, the situation at 302 North Goodman Street is such that an extension cannot be granted.

While your letter states that you have "... always followed the spirit and intent of the law," we both know from past history that this is not entirely true. Your occupancy of this structure without permits and certificates of occupancy are prime examples of your disregard for following safe and proper procedures. I sympathize with your tenants who, I believe, lease space from you in good faith. However, upon reviewing this matter with the various City departments involved, it is clear that we cannot approve a situation that continues to leave these tenants at risk.

Your use of Pamela White as an example is an indication of a lack of knowledge of New York State Building codes which would have been made clear to you had this occupancy been done legally. As was stated at the meeting on May 5, a fire escape is not considered a legal exit in a building of this construction type. Further, given the type of use, her space must be within 20 ft. of a second exit, not 50 ft. As you state. Therefore, her space is a full 27 ft. beyond the legal mark.

Your request for a permit to complete construction of the Onondaga School will be considered once all of the illegal occupants have been vacated and final drawings for the school have been submitted. I would like to be more accommodating, but you may recall that it is your continued

construction in the space designated for the Onondaga School after a Stop Work Order was issued that triggered the initial inspection by the Fire Department and the City's subsequent order to vacate.

Over the years, you have exhibited an uncanny ability to save and rehabilitate existing industrial structures. Unfortunately, this was not always done by initially following the appropriate codes and requirements. Once the issues at 302 North Goodman Street are resolved, we will be happy to work with you on this and other developments. However, it must be with the understanding that you are to follow appropriate procedures and codes.

If you have any questions regarding the requirements for completing this project, I would be happy to make the arrangements for a full and thorough explanation.

Sincerely,

John R. Accorso

John R. Accorso
Deputy Commissioner/Director of Buildings and Zoning

JRA:cls

xc: William A. Johnson, Jr., Mayor
Thomas R. Argust, Commissioner, Department of Community Development
Ray Tovar
Margaret Gregory, Director, NET Office - Area D, 846 South Clinton Avenue
Amy Nichols, Attorney, Law Department, City of Rochester
Kurt Martin, Assistant Architect/Plan Review, Dept. of Community Development

h:\wpdoc\jra5b

NAME STERN, GARY & MARCIA

FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☐ EAST
☐ PERMIT ☐ WEST
☐ SPECIAL

LOCATION: 302 NORTH GOODMAN ST

Person contacted: Telephone #:

PERSON ABOVE IS SUMMONED TO APPEAR AT:
MUNICIPAL CODE VIOLATIONS BUREAU
42 South Ave., Rochester, N.Y.

442-9061

DATE RECEIVED IN FIRE SAFETY: DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECT	NO VIOLATIONS NOTED	NOTES	O.K. TO FILE	INSPECTOR
5/4/00	11 AM							PHOTO'S + INSPECTION		LIEUTENANT EISENHART
5/5/00	9 AM							205156 - 205157		
5-5	1030							PERSONAL SERVICE		
JUN 13 2000								PAID TICKETS	X	

APPEARED:		DEFAULTED:	
GUILTY:	X	NOT GUILTY:	
FINE:	150	ADJURNED DATE:	

HEARING OFFICER:

INSPECTOR'S COMMENT:

FILE

205156 OFFICER'S COPY

THE PEOPLE OF THE STATE OF NEW YORK -VS-

STERN GARY I + MARCIA

Last Name (Defendant) First M.I.

274 N. GOODMAN ST

Street Address Apt. #

ROCHESTER NY 14607

City State Zip

__/__/__ __ _____

D.O.B. Sex Summons Issued To

LICENSE INFORMATION

License # _____ Exp Date __/__/__

☐ Amusement Center ☐ Entertainment Center ☐ Alarm Permit

☐ Taxi Driver ☐ Solicitor/Vendor ☐ _____

☐ Dog: Color _____

Breed _____ (M) (F)

VEHICLE DESCRIPTION

Year Make Type Color MV Reg# Hack Plt#

PERSON ABOVE IS CHARGED AS FOLLOWS:

302 N. GOODMAN ST

Place of Occurrence Rochester, Monroe Co., N.Y.

5/4/00 11 (A.M./P.M.)

Date Time

OFFENSE SPRINKLER SYSTEM SHUT DOWN

In violation of Chapter 9NYCRR SEC 193 SUB 1A of the Code of the City of Rochester, N.Y.

FACTUAL PART: The above named defendant did on the stated date, time and place

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at 9 (A.M. / P.M.)

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COMPLAINANT LT. EISENHART 5/5/00 Date

ID # 6579 SEC RFD

REV 10/95 G.O. 565

205157 OFFICER'S COPY

THE PEOPLE OF THE STATE OF NEW YORK -VS-

STERN GARY I + MARCIA

Last Name (Defendant) First M.I.

274 N. GOODMAN ST

Street Address Apt. #

ROCHESTER NY 14607

City State Zip

__/__/__ __ _____

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LICENSE INFORMATION

License # _____ Exp Date __/__/__

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COMPLAINANT LT. EISENHART 5/5/00 Date

ID # 6579 SEC RFD

REV 10/95 G.O. 565

MEMO LETTER

Stern Realty & Management Co.

274 N. GOODMAN STREET ROCHESTER, NEW YORK 14607
(716) 442-9061
Fax (716) 760-2394

Date: May 10, 2000
To: All Residential Tenants at 302 North Goodman Street (4th Floor)
From: Stern Realty & Management Co.
Subject: Notice & Order from the City of Rochester to Vacate the Premises

Dear Tenants:

Please take notice that the City has advised us that you may keep your belongings stored in your apartment for one (1) month. All persons must vacate the apartments immediately. Once you have made plans to move your goods from the apartment, you must contact the City (NET) office at 428-7640 so they can make arrangements to escort you to the apartment.

Stern Realty will not charge you for storage of your goods. Stern Realty will not be responsible in any way with respect to items remaining in the apartments.

Please make arrangements to have all utility services (gas, electric, telephone, & cable) turned off as soon as possible.

Thank you for your immediate attention to these matters.

Sincerely,

Stern Realty & Management Co.

Jean M. Sak

Jean M. Sak

DOOR CODES
PK. LOT SIDE
245 *
CONCOURSE SIDE
245

cc: Sophouli Panayiotopoulos - Apt. #400 - VACANT (STILL IN APT)
John R. Klee - Apt. #401 (Turned in key, furniture still there)
Sharon & Gray Mayfield - Apt. # 403
Robert LaTorre - Apt. # 404 - VACANT - furniture still there
WEST SIDE
Kevin M. Conroy - Apt. #405 - moving on Monday 5/15
Mary K. Koons - Apt. # 406
James J. Nesci - Apt. # 407
Anthony Taddeo - Apt. # 408
Jane C. Rochefort- v.Adelman - Apt. #409 - [redacted]
EAST SIDE

NET Office, Attn: Peggy Gregory

jms

402-VACANT

ON PREMISE SUPERVISOR
CELL - 281 - 393[redacted] DAVID
244-0447 HOME

Date: **May 2, 2000**

To: **All Residential Tenants at 302 North Goodman Street**

From: **'Compliance' Investigation**

Subject: **Lease Termination**

Further to the impending eviction notices dated April 26, 2000, a meeting detailing analysis of the situation and what can be done about it has been planned. An orderly and constructive approach is anticipated—to that end, any previously-researched material you could present would be extremely appreciated.

'Compliance' Investigation Meeting

1st Floor, Village Gate (274 North Goodman St.), In front of what used to be *The Sweet Boutique*; opposite what used to be *Cottage Brewing*.

Thurs. May 4, 2000

7:30 p.m.

Sometimes, it is not the answer that enlightens, but the question.

Eugene Ionesco

Intelligence is the particular facility a person has to cope with any given situation.

M.S. Michel (Sweet Murder, 1943)

Village Gate
SQUARE
274 N. Goodman Street, Rochester, New York 14607, (716) 442-9061

May 12, 2000

302 North Goodman Street, 4th Floor Tenants

This notice is to inform you that the elevator will be shut down on Monday, May 15, 2000. It will not service the 4th floor after 4:30 p.m.

Village Gate Office
442-9061

Attention, 4th Floor Residents

We, the 4th Floor residents of 302 North Goodman Street, will be having a meeting Monday, May 8th at 07:30 p.m.

The meeting will be held in front of what used to be *the Sweet Boutique* on the 1st. Floor of Village Gate Square.

We believe that we can do something to prevent our eviction, but we need you to show up at this meeting if we are going to be able to do this.

Village Gate

SQUARE

274 N. Goodman Street, Rochester, New York 14607, (716) 442-9061

Date: April 26, 2000
To: All Residential Tenants at 302 North Goodman Street (4th Floor)
From: Village Gate Management Office
Subject: Lease Termination

Dear Tenants:

We are so very sorry to share the news with you that, for reason of being out of compliance with the City of Rochester and its ordinances, we can no longer rent residential space in the building known as 302 North Goodman Street.

We have had the good experience to become well acquainted with some of you who have been renting here for a few years. All of you have been good Tenants who will be missed by our office.

Please contact our office for further instructions concerning your move from this area.

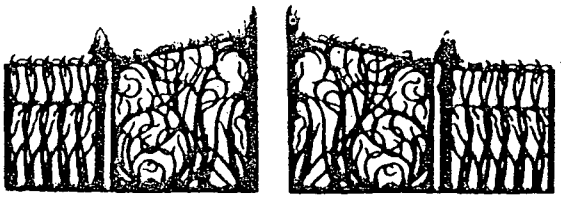
Sincerely,

Village Gate Square

Jean M. Sak

Jean M. Sak

jms



MEMO LETTER

Stern Realty & Management Co.

274 N. GOODMAN STREET ROCHESTER, NEW YORK 14607
(716) 442-8081
Fax (716) 760-2394

Date: May 10, 2000
To: All Residential Tenants at 302 North Goodman Street (4th Floor)
From: Stern Realty & Management Co.
Subject: Notice & Order from the City of Rochester to Vacate the Premises

Dear Tenants:

Please take notice that the City has advised us that you may keep your belongings stored in your apartment for one (1) month. All persons must vacate the apartments immediately. Once you have made plans to move your goods from the apartment, you must contact the City (NET) office at 428-7640 so they can make arrangements to escort you to the apartment.

Stern Realty will not charge you for storage of your goods. Stern Realty will not be responsible in any way with respect to items remaining in the apartments.

Please make arrangements to have all utility services (gas, electric, telephone, & cable) turned off as soon as possible.

Thank you for your immediate attention to these matters.

Sincerely,

Stern Realty & Management Co.

Jean M. Sak

Jean M. Sak

cc: Sophouli Panayiotopoulos - Apt. #400
John R. Klee - Apt. #401
Sharon & Gray Mayfield - Apt. # 403
Robert LaTorre - Apt. # 404
Kevin M. Conroy - Apt. # 405
Mary K. Koons - Apt. # 406
James J. Nesci - Apt. # 407
Anthony Taddeo - Apt. # 408
Jane C. Rochefort- V. Adelman - Apt. # 409

NET Office, Attn: Peggy Gregory

jms

BSCFODS BIS - CERT. OF OCCUPANCY DETAIL DATE: 05/10/2000 *

C OF O NO.: 47408 SFX: EFFECTIVE DATE: 10/09/97 EXPIRE DATE: 11/01/02

ENTRY ADDRESS: 0274 N GOODMAN ST
SBL NO: 106 . 840 - 0001 - 010 . 000 / 0000

C OF O TYPE: PERM-PARTIAL

RENEWAL DATE: 07/24/97 RENEWAL STATUS: 0
FEE PAID: 0.00 CASE NUMBER: 0000000

PRIOR EDIT DATE: 10/16/97 CURRENT EDIT DATE: 1997/10/16

TERMS OF USE:
CERTIFICATE FOR 7 ROOMING UNITS WITH SHARED COMMUNITY AND COOKING FACILITIES ON 3RD FLOOR OF INDUSTRIAL/COMMERCIAL BLDG. UNITS 302, 304, 306, 308, 310, 312, 314,-WEST SIDE ONLY MAINTAIN 1 RESIDENT/MANAGER UNIT (PERMANTLY) MAINTAIN 3000 SQ. FT./OF OPEN SPACE AT REAR 316 N GOODMAN ST/(PER E-046-96-97)

CONDITIONS:

PF14-PROP SUMM PF15-ADDR LIST PF16-SBL# LIST
PF17-C/O - SBL PF19-C/O NARR

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

GARY I + MARCIA STERN
NAME

Date MAY 5 2000 0620

274 N GOODMAN ST
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

9NYCRR
OK 1162.3B EXIT SIGN ON #1 & #3 FLOOR'S SHALL BE ILLUMINATED

OK 1163.13B3 PORTABLE FIRE EXTINGUISHERS SHALL BE IN THEIR DESIGNATED LOCATION ON #3 + #4 FLOORS

OK 1163.13 B1 PORTABLE FIRE EXTINGUISHER SHAL BE INSPECTED IN ACCORDANCE WITH NFPA #10

Received by: _____ NAME _____ TITLE _____ DATE

By Order of Fire Marshal

Fire Marshal LT. EISENHART

DATE OF COMPLIANCE MAY 9 2000 1330

Fire Marshal A.D. Eisenhart

FD 506

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

GARY I & MARCIA STERN
NAME

Date MAY 5 2000

274 N. GOODMAN ST
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

9NYCRR
OK 1163.13A WATER-BASED FIRE PROTECTION SYSTEM SHALL BE INSPECTED & TESTED IN ACCORDANCE WITH NFPA #25
* RECORDS OF INSPECTIONS, TEST & MAINTENANCE NFPA 25 1.8 OF THE SYSTEM SHALL BE SUBMITTED TO THE FIRE MARSHAL

OK HARRY RAPP - PLUMBER - STATED TO ME THE SPRINKLER SYSTEM HAS BEEN SHUT DOWN 1193.1A APPROX 2 WEEKS - NO NOTIFICATION WAS MADE TO THE FIRE DEPT.

Received by: _____ _____ _____
NAME TITLE DATE

By Order of
Fire Marshal

Fire Marshal LT. EISENHART

DATE OF COMPLIANCE MAY 9 2000 1330

Fire Marshal D. D. Eisenhart

FD 506

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

GARY I + MARCIA STERN
NAME

Date MAY 5 2000

374 N. GOODMAN ST
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

9NYCRR
OK 1162.5AB SELF-CLOSING DEVICES SHALL BE INSTALLED ON DOORS #303 & #304

1162.2C MATERIALS SHALL NOT BE STORED IN
OK STAIRWAYS 3RD FLOOR WEST OPP. #304
#1 FLOOR NORTH SIDE IN DAY CARE AREA

1032.3AB EMERGENCY LIGHTING SHALL BE TESTED
OK AND REPORT SUBMITTED TO THE FIRE MARSHAL

Received by: _____ _____ _____
NAME TITLE DATE

By Order of
Fire Marshal

Fire Marshal LT EISENHART

DATE OF COMPLIANCE MAY 9 2000 1330

Fire Marshal D. D. Eisenhart

FD 506

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION
AND ORDER TO COMPLY

GARY I. & MARCIA STERN
NAME

Date 5/5/00

274 N. GOODMAN ST
ADDRESS

ROCHESTER, N.Y. 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST. reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for **immediate correction** of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

1163.13 C(1)- FIRE ALARM SYSTEMS:
FIRE ALARM SYSTEMS SHALL BE MAINTAINED IN A PROPER OPERATING CONDITION IN CONFORMITY WITH REFERENCE STANDARD RS 55.

1163.13 (D) - FIRE AND SMOKE DETECTING SYSTEMS:
FIRE AND SMOKE DETECTING SYSTEMS SHALL BE MAINTAINED IN A PROPER OPERATING CONDITION IN CONFORMITY WITH REFERENCE STANDARD RS 55 (SEE SECTION 1250.3 OF THIS CODE).

NOTE: FINAL ACCEPTANCE TEST(S) TO BE CONDUCTED AND WITNESSED BY THE ROCHESTER FIRE DEPARTMENT'S FIRE SAFETY DIVISION (SPECIAL INSPECTIONS UNIT).

Received by: _____ _____ _____
NAME TITLE DATE

By Order of
Fire Marshal

Fire Marshal Lt. Daniel J. Pomeroy

DATE OF COMPLIANCE 5/8/00

Fire Marshal Lt. Daniel J. Pomeroy

FD 506

City of Rochester

DON TEDISCO

6184

Fire Safety Division
Fire Department

300 Public Safety Building
Rochester, New York 14614
(716) 428-7037
(716) 428-6069 Fax

DATE: 5/8/00

DON TEDISCO
RE: 302 N. GOODMAN ST

TO WHOM IT MAY CONCERN:

As of this date, the Rochester Fire Department witnessed the FLOW TEST/ALARM TEST SEE NOTE.

at the premises located at 302 N. GOODMAN ST. (VILLAGE GATE).

No violations were noted.

Sincerely,

H. Daniel J. Caccioto
Code Enforcement Officer
(716) 428-7037

(alrmtest)

OK = ALARM TEST - DAY CARE;
OK FLOOR ABOVE DAY CARE; ATTRIUM
OK AUDIBLES ALL OTHER FLOORS.
OK INSPECTION TEST VALVE INSTALLED
OK FLOW TEST.
OK SPRINKLER REPAIRED IN STAIRWELL

ALL OTHER ITEMS TO BE FOLLOWED UP BY LT EISENHART; KURT ~~SMITH~~ MARTIN & DON TEDISCO

LT DOC 5/8/00

SMDISPLY SPECIAL MAILING MULTI-ADDRESS DISPLAY DATE: 05/05/2000 DISPLAY

SBL NO: 106 . 840 - 0001 - 010 . 000 / 0000
OWNER: GARY I & MARCIA STERN FAMILY LIMITED PARTNERSHIP
LOCATION: 0274-302 N GOODMAN ST 14607

- - - - - ARLM SPECIAL MAILING - - - - -

GARY I & MARCIA STERN FAMILY
LIMITED PARTNERSHIP

274 N GOODMAN ST
ROCHESTER, NY 14607

- - - - REFUSE BILLING ADDRESS - - - -

VILLAGE GATE
274 N GOODMAN ST
ROCHESTER, N Y 14607

- - WSE OWNER ADDRESS- -

GARY I & MARCIA STERN FA
0274 N GOODMAN ST N
ROCHESTER NY 14607

- - - WATER BILLING ADDR - - -

WSE OWNER ADDRESS
IS BILLING ADDRESS

- - PUREWATR BILLING ADDR - -

VILLAGE GATE SQUARE
274 N GOODMAN ST
ROCHESTER, NY 14607

- - TAX BILL PAYEE - - -

OWNER IS PAYEE

- - BIS SPECIAL MAILING- -

NOT AVAILABLE

- - - - FUTURE USE- - - -

PF14-TRANSFER TO WBSPEC TO VIEW ADDITIONAL WSE ADDRS'S PF12-RETURN TO ARMXLOC

FIRE SAFETY INSPECTION RECORD

302

☐ LICENSE
☐ PERMIT

LOCATION: ~~302~~ N. GOODMAN ST ■ SPECIAL

PERSON CONTACTED: GRAY STERN TELEPHONE #: 442-9061

DATE RECEIVED IN FIRE SAFETY / DATE	TIME OF INSPECTION	NO ENTRY	# ORDERS ISSUED	# REFERRALS ISSUED	NO WORK DONE	# VIOLATIONS CORRECTED	NO VIOLATIONS NOTED	NOTES	OK TO FILE	INSPECTOR
6/27/00								ACAM TEST SHIELD - GAS DAYCARE CENTER		
6/29/00	3 P.M.							OK	X	LMS

City of Rochester

TEDISCO
6184

Fire Safety Division
Fire Department

300 Public Safety Building
Rochester, New York 14614
(716) 428-7037
(716) 428-6069 Fax

GARY STERN
760-239-FAX
7/5/00
4:00p

DATE: 6/28/00

302 N. GOODMAN ST.
DON TEDISCO
6184
NEW DAY CARE

TO WHOM IT MAY CONCERN:

As of this date, the Rochester Fire Department witnessed the ALARM TEST NEW DAY CARE

at the premises located at 302 N. GOODMAN ST.

No violations were noted.

Sincerely,

Lt. David J. Lamato
Code Enforcement Officer
(716) 428-7037

(alrmtest)

SHIELD ALARM SYSTEMS, INC.

967 FIVE MILE LINE ROAD
WEBSTER, NY 14580-2527
PHONE: (716) 671-0996
FAX: (716) 787-1556
CELL (716) 370-1985

SHIELD967@AOL.COM

June 19, 2000

DEAR DAN,

ON JUNE 13, 2000 OUR OFFICE RECEIVED A CALL FROM GARY STERN WHO OWNS VILLAGE GATE SQUARE, LOCATED AT 274 N. GOODMAN STREET IN THE CITY OF ROCHESTER. MR STERN STATED TO US THAT SOMEONE HAD CUT THROUGH A MAIN CABLE FOR THE FIRE ALARM SYSTEM WHEN THEY WERE DEMOLISHING A SECTION IN VILLAGE GATE. HE ALSO STATED THAT THE FIRE ALARM WENT OFF, AND THAT THE FIRE SYSTEM WAS COMPLETELY OUT. ON JUNE 14TH WE TOOK THE SECTION THAT WAS CUT OFF LINE BECAUSE THAT AREA IS SLATED FOR A NEW SYSTEM. WE ALSO REPLACED TWO FUSES THAT WERE BLOWN IN THE MAIN PANEL. WE THEN INSPECTED AND TESTED THE FIRE SYSTEM THREE DIFFERENT TIMES. ALL TEST SIGNALS WERE RECEIVED BY THE CENTRAL STATION. ALL HORNSTROBES/ STROBES FUNCTIONED PROPERLY. THE FIRE SYSTEM WAS PUT BACK ON LINE ON JUNE 14TH 2000 AT 1600 HRS AND WAS FULLY OPERATIONAL.

RESPECTFULLY SUBMITTED

GARY J BLASCHEK

SHIELD ALARM SYSTEMS, INC.

City of Rochester

TEDISCO
6184

Fire Safety Division
Fire Department

300 Public Safety Building
Rochester, New York 14614
(716) 428-7037
(716) 428-6069 Fax

GARY STERN
760-2394 F.
7/5/00
4:00p

DATE: 6/28/00

302 N. GOODMAN ST.
DON TEDISCO
6184
NEW DAY CARE

TO WHOM IT MAY CONCERN:

As of this date, the Rochester Fire Department witnessed the ALARM TEST NEW DAY CARE

at the premises located at 302 N. GOODMAN ST.

No violations were noted.

Sincerely,

Lt. David J. Lamb
Code Enforcement Officer
(716) 428-7037

(alrmtest)

City of Rochester
Department of
Community Development

City Hall
Church and Fitzhugh Streets
Rochester, New York 14614

Case Nbr: 263797
Premises: 274-302 N Goodman St
Type of Inspection: Vacate
Date Issued: May 5, 2000

To: Gary I & Marcia Stern Family
Limited Partnership
274 N Goodman St
Rochester, New York 14607

NOTICE AND ORDER

PLEASE TAKE NOTICE that an inspection of the above property which is owned, operated or occupied by you has revealed that the property is in violation of the codes, laws and ordinances of the City of Rochester and the State of New York and that the existence of these violations endangers the public health, safety and welfare.

Included is a particular statement of the violations existing on the subject property, the State law or municipal ordinance which is being violated and the time within which each violation must be corrected.

A reinspection of the subject property will be conducted upon the expiration of the time given to comply. If such reinspection reveals non-compliance with this order the Commissioner of Community Development shall take whatever legal action is necessary to compel compliance with this order. Call the Bureau of NET at 428-6520, between the hours of 8:00 am to 9:00 am or 4:00 pm to 5:00 pm, Monday through Friday if you wish to schedule an appointment to be present at the reinspection.

Note: Repairs must conform with standard building construction practices and must be performed using like materials and colors for repair or replacement.

_____ ADMIN OF CODE COMPL

DATE OF INSPECTION: May 5,2000

INSPECTOR: Kurt Martin
428-6526

HEARING RIGHTS SECTION 52-5A(2) OF THE MUNICIPAL CODE OF THE CITY OF ROCHESTER GIVES YOU THE RIGHT TO HAVE AN ADMINISTRATIVE HEARING CONCERNING THE CITED VIOLATIONS BEFORE THE COMMISSIONER OF COMMUNITY DEVELOPMENT OR HIS REPRESENTATIVE ONLY IF THE COMMISSIONER HAS DETERMINED THAT AN EMERGENCY EXISTS. YOU MAY REQUEST THIS HEARING IN PERSON OR BY WRITING TO THE COMMISSIONER PRIOR TO THE EXPIRATION OF THE PERIOD FOR COMPLIANCE GIVEN IN THIS NOTICE AND ORDER.

BY ORDER OF THE COMMISSIONER

City of Rochester

OFFICE OF THE FIRE MARSHAL
Fire Safety Division

300 Public Safety Building
150 South Plymouth Avenue
Rochester, New York 14614
(716) 428-7037
(716) 428-6785 FAX

May 15, 2000

To: All Residents, 4th Floor, 302 North Goodman Street, Rochester, New York

Subj: **Order to Vacate Residential Occupancy Use of Premises at 302 North Goodman Street, Rochester, New York.**

Dear Sir/Madam:

On May 5, 2000, the City of Rochester Building Department Ordered the building's owner(s) to immediately vacate the 4th floor residential use of the premises at 302 North Goodman Street, Rochester, New York.

The 4th floor of 302 North Goodman Street, Rochester, New York was improperly established as a residential tenancy and does not have a valid Certificate of Occupancy that establishes residential use of the building's 4th floor. Without a valid Certificate of Occupancy, it is unlawful to occupy a premises for residential purposes.

No Certificate of Occupancy was issued for residential use of the 4th floor of 302 North Goodman Street because the premises lacked the minimum required egress capability (additional stairway). Egress capability is a life safety concern and it is a minimum building safety requirement established by the New York State Uniform Fire Prevention and Building Code.

The conditions that were necessary to obtain a Certificate of Occupany to permit residential use of the 4th floor premises were clearly established by the New York State Uniform Fire Prevention and Building Code Board of Review in a *Varience* that was issued to the owner(s) of the premises. The *Varience* was never complied with. Therefore, residential use of the 4th floor premises at 302 North Goodman Street, Rochester, New York, was never legally established.

Unfortunately, until the additional egress capabilty is established, the 4th floor is not permitted for residential use and shall be immediately vacated.

I understand your frustration and I recognize the adverse impact, both financially and emotionally, that you face as a result of having entered into your lease or rental agreement. But, as the Fire Marshal of the City of Rochester, I am obligated under law to ensure that violations that impact public fire safety are immediately abated.

I am asking your cooperation in abating this difficult and dangerous condition.

For a fire safe community,

Reynaldo E. Tovar, Deputy Fire Chief
Fire Marshal

SPRINKLER SYSTEM - STANDPIPE - FIRE ALARM
SHUT-DOWN NOTIFICATION

SYSTEM LOCATION

STREET ADDRESS: 302 N. Goodman St.

BUSINESS NAME: Village Gate

NAME OF CALLER: Gary Stern

TELEPHONE:( ) 442-9061

TYPE OF SYSTEM: SPRINKLER STANDPIPE FIRE ALARM

SERVICE SHUT OFF: TIME: 8 AM - 5PM DATE: 5-4-00 Every day 8-5pm until

APPROXIMATELY HOW LONG WILL SYSTEM BE SHUT DOWN: 5/11/00

REASON FOR SYSTEM SHUT-DOWN: remodeling

AREA OF BUILDING/COMPLEX AFFECTED: 1st & 2nd floor.

ASK CALLER IF THIS FACILITY HAS ANY SPECIAL STORAGE OF PROCESS HAZARDS. IF YES, THIS FORM MUST BE PASSED TO A FIRE INSPECTOR IMMEDIATELY AFTER MAKING THE NOTIFICATIONS.

NOTIFICATION MADE TO FIRE COMPANIES VIA P&R OR FAX TO 911 AT 528-2262

RECEIVED INFO BY: Gerri DATE: 5-4-00

SERVICE SHUT DOWN- (FAX TO 528-2262) TIME:

SERVICE RESTORED TIME:

AFTER 7 DAYS, THE SYSTEM HAS NOT BEEN RESTORED, AN INSPECTION SHALL BE MADE OF THE PROPERTY TO DETERMINE THE OPERATIONAL CAPABILITY OF THE SYSTEM. A WITNESS TEST SHALL BE REQUIRED OF SPRINKLER AND STANDPIPE SYSTEMS THAT WERE SHUT-DOWN FOR REPAIR.

SERVICE RESTORED TIME: DATE:

12:30pm
5/4/00

MEMO LETTER

Stern Realty & Management Co.

274 N. GOODMAN STREET ROCHESTER, NEW YORK 14607
(716) 442-9061
Fax (716) 760-2394

Date: May 8, 2000
To: All Residential Tenants at 302 North Goodman Street (4th Floor)
From: Stern Realty & Management Co.
Subject: Notice & Order from the City of Rochester to Vacate the Premises

Dear Tenants:

Enclosed please find copy of a notice and order from the City of Rochester Department of Community Development. As per this notice and order and further instructions from the City, the premises in which you reside must be vacated immediately.

For those of you who have already paid rent for the month of May, we will prorate this rent and refund you accordingly.

Sincerely,

Stern Realty & Management Co.

Jean M. Sak

Jean M. Sak

cc: Sophouli Panayiotopoulos - Apt. #400
John R. Klee - Apt. #401
Sharon & Gray Mayfield - Apt. # 403
Robert LaTorre - Apt. # 404
Kevin M. Conroy - Apt. # 405
Mary K. Koons - Apt. # 406
James J. Nesci - Apt. # 407
Anthony Taddeo - Apt. # 408
Jane C. Rochefort- v.Adelman - Apt. # 409

jms

NET

City of Rochester
Department of
Community Development

City Hall
Church and Fitzhugh Streets
Rochester, New York 14614

Case Nbr: 263797
Premises: 274-302 N Goodman St
Type of Inspection: Vacate
Date Issued: May 5, 2000

RECEIVED
MAY - 8 2000
STERN REALTY & MGMT CO.

To: Gary I & Marcia Stern Family
Limited Partnership
274 N Goodman St
Rochester, New York 14607

NOTICE AND ORDER

PLEASE TAKE NOTICE that an inspection of the above property which is owned, operated or occupied by you has revealed that the property is in violation of the codes, laws and ordinances of the City of Rochester and the State of New York and that the existence of these violations endangers the public health, safety and welfare.

Included is a particular statement of the violations existing on the subject property, the State law or municipal ordinance which is being violated and the time within which each violation must be corrected.

A reinspection of the subject property will be conducted upon the expiration of the time given to comply. If such reinspection reveals non-compliance with this order the Commissioner of Community Development shall take whatever legal action is necessary to compel compliance with this order. Call the Bureau of NET at 428-6520, between the hours of 8:00 am to 9:00 am or 4:00 pm to 5:00 pm, Monday through Friday if you wish to schedule an appointment to be present at the reinspection.

Note: Repairs must conform with standard building construction practices and must be performed using like materials and colors for repair or replacement.

ADMIN OF CODE COMPL

DATE OF INSPECTION: May 5,2000

INSPECTOR: Kurt Martin
428-6528

HEARING RIGHTS SECTION 52-5A(2) OF THE MUNICIPAL CODE OF THE CITY OF ROCHESTER GIVES YOU THE RIGHT TO HAVE AN ADMINISTRATIVE HEARING CONCERNING THE CITED VIOLATIONS BEFORE THE COMMISSIONER OF COMMUNITY DEVELOPMENT OR HIS REPRESENTATIVE ONLY IF THE COMMISSIONER HAS DETERMINED THAT AN EMERGENCY EXISTS. YOU MAY REQUEST THIS HEARING IN PERSON OR BY WRITING TO THE COMMISSIONER PRIOR TO THE EXPIRATION OF THE PERIOD FOR COMPLIANCE GIVEN IN THIS NOTICE AND ORDER.

BY ORDER OF THE COMMISSIONER

City of Rochester
Department of
Community Development

Case Nbr: 263797
Premises: 274-302 N Goodman St
Type of Inspection: Vacate
Date Issued: May 5, 2000

FAILURE TO CORRECT THE FOLLOWING **POTENTIALLY HAZARDOUS** VIOLATIONS WITHIN ONE (1) DAY OF ISSUE OF THIS NOTICE WILL RESULT IN THIS CASE BEING IMMEDIATELY REFERRED TO THE ENFORCEMENT UNIT FOR THE ISSUANCE OF AN APPEARANCE TICKET. THE FOLLOWING EVICTIONS ALL PERTAIN TO 302 N GOODMAN STREET:

	APT #	LOCATION	UNITS	VIOLATION	CODE
1.hs	All	4th Floor		PLEASE TAKE NOTICE THAT THESE UNITS/APARTMENTS MUST BE VACATED AT ONCE DUE TO THE VIOLATIONS CONTAINED IN THIS NOTICE AND ORDER. Specifically for your violation of 9NYCRR1300.1 And Rochester Fire Department Notice of Violation dated May 5, 2000 attached hereto	90-27G(1)
2.hs		3rd Floor		PLEASE TAKE NOTICE THAT THESE UNITS/APARTMENTS MUST BE VACATED AT ONCE DUE TO THE VIOLATIONS CONTAINED IN THIS NOTICE AND ORDER. Any portion of east end with travel distance Greater than 50 feet to any exit stair Shall be vacated pursuant to 9NYCRR735.8	90-27G(1)
3.				THE HAZARDOUS CONDITION DESCRIBED HEREIN AT THE SUBJECT PROPERTY MUST BE PROPERLY CORRECTED. Does not meet exit requirements for Number of units occupied	9NYCRR735.1
4.		4th Floor		THE USE/OCCUPANCY OF THE SUBJECT PROPERTY AS HEREAFTER DESCRIBED HAS BEEN INITIATED WITHOUT THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY. Four story frame structure with Residential units on 4th floor Occupied illegally in violation of 9NYCRR1300.1 Order 126.C	115-25C
11.		3rd Floor		THE OCCUPANCY HAS BEGUN WITHOUT THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY.	39-307(B)

Stern Realty & Management Co.

274 N. GOODMAN STREET ROCHESTER, NEW YORK 14607
(716) 442-9061 FAX (716) 760-2394

FAX COVER SHEET

DATE: 5/10/00

TO: Lt. Eisenhart

RECIPIENTS FAX #: 428 — 6785

FROM: Gary Stern

NUMBER OF PAGES INCLUDING THIS PAGE: 5

(PLEASE ADVISE IF ALL PAGES ARE NOT RECEIVED)

These violations have been corrected.

Gs

RECEIVED
ROCHESTER FIRE DEPT.
00 MAY 11 AM 7:58

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION
AND ORDER TO COMPLY

GARY I. & MARCIA STERN
NAME

Date 5/5/00

274 N. GOODMAN ST
ADDRESS

ROCHESTER, N.Y. 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST. reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for immediate correction of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

1163.13 C(1)- FIRE ALARM SYSTEMS:
FIRE ALARM SYSTEMS SHALL BE MAINTAINED IN A PROPER OPERATING CONDITION IN CONFORMITY WITH REFERENCE STANDARD R555.

1163.13 (D) - FIRE AND SMOKE DETECTING SYSTEMS:
FIRE AND SMOKE DETECTING SYSTEMS SHALL BE MAINTAINED IN A PROPER OPERATING CONDITION IN CONFORMITY WITH REFERENCE STANDARD R555 (SEE SECTION 1250.3 OF THIS CODE).
NOTE: FINAL ACCEPTANCE TEST(S) TO BE CONDUCTED AND WITNESSED BY THE ROCHESTER FIRE DEPARTMENT'S FIRE SAFETY DIVISION (SPECIAL INSPECTIONS UNIT).

Received by: _____ NAME _____ TITLE _____ DATE

By Order of
Fire Marshal

Fire Marshal H. Daniel S. Ponce

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION
AND ORDER TO COMPLY

GARY I + MARCIA STERN
NAME

Date MAY 5 2000 0620

274 N GOODMAN ST
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for immediate correction of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
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3rd & SUBSEQUENT	$375	$750

9NYCRR
1162.3B EXIT SIGN ON #1 & #3 FLOORS SHALL BE ILLUMINATED

1163.13B3 PORTABLE FIRE EXTINGUISHERS SHALL BE IN THEIR DESIGNATED LOCATION ON #3 + #4 FLOORS

1163.13 B1 PORTABLE FIRE EXTINGUISHER SHAL BE INSPECTED IN ACCORDANCE WITH NFPA #10

Received by: _____ NAME _____ TITLE _____ DATE

By Order of Fire Marshal

Fire Marshal LT. EISENHART

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

2 of 3

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

GARY I & MARCIA STERN
NAME

Date MAY 5 2000

274 N. GOODMAN ST
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for immediate correction of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

9NYCRR
1163.13A WATER-BASED FIRE PROTECTION SYSTEM SHALL BE INSPECTED & TESTED IN ACCORDANCE WITH NFPA #25
* RECORDS OF INSPECTIONS, TEST, & MAINTENANCE NFPA 25 1.8 OF THE SYSTEM SHALL BE SUBMITTED TO THE FIRE MARSHAL

HARRY RAPP - PLUMBER - STATED TO ME THE SPRINKLER SYSTEM HAS BEEN SHUT DOWN
1193.1A FOR OVER 2 WEEKS - NO NOTIFICATION WAS MADE TO THE FIRE DEPT.

Received by: _____ _____ _____
NAME TITLE DATE

By Order of Fire Marshal

Fire Marshal LT. EISENHART

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

3 of 7

City of Rochester Fire Department
Fire Safety Division
150 Plymouth Avenue S.
Room 300
Rochester, NY 14614

OFFICE OF THE FIRE MARSHAL
Telephone: 428-7037
Fax: 428-6785

NOTICE OF VIOLATION

AND ORDER TO COMPLY

GARY I + MARCIA STERN
NAME

Date MAY 5 2000

374 N. GOODMAN ST
ADDRESS

ROCHESTER NY 14607
CITY, STATE, ZIP

Inspection of the premises located at 302 N. GOODMAN ST reveals violations of the Rochester Fire Prevention Code. Orders are hereby issued for immediate correction of violations listed herein. Compliance shall be verified by the Fire Marshal.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

9NYCRR
1162.5AB SELF-CLOSING DEVICES SHALL BE INSTALLED ON DOORS #303 & #304

1162.2C MATERIALS SHALL NOT BE STORED IN STAIRWAYS 3RD FLOOR WEST OPP. #304 #1 FLOOR NORTH SIDE IN DAY CARE AREA

1032.3AB EMERGENCY LIGHTING SHALL BE TESTED AND REPORT SUBMITTED TO THE FIRE MARSHAL

Received by: _____ NAME _____ TITLE _____ DATE

By Order of Fire Marshal

Fire Marshal LT EISENHART

DATE OF COMPLIANCE _____

Fire Marshal _____

FD 506

5/3/00 15:30

302 N. GOODMAN ST

GARY STERN

HARRY RAPP - PLUMBER

5/4/00 11 AM

AL RICHARDS
LT EISENHART
LT CHILDS
KURT MARTIN - B/Z

GATE POST TO POST = 11'-10"
ROCK TO ROCK = 13'-2"

2 WEEKS

F.D. CONNECTION - NOT MARKED - FRONT
SOUTH SIDE " " CAP MISSING

SPRINKLER SYSTEM - SOUTH SIDE - CLOSED POSITION

1ST FL NORTH - EXIT LIGHT OUT

✓ 4TH EXTINGUISHER - MISSING

3RD EXIT LIGHT OUT
EXTING MISSING
EXT OUTDATED - ROCK FIRE 12/98 94'

Rm #311 TO #307 = 66'
Rm #307 TO EXIT = 13'

66
15
13
94

Rm #304 - Rm #307 SELF CLOSER - REAR

3RD STAIRWELL - WEST #304 BLOCKED - 1162.2C
HEAT TAPE ON BRANCH LINES

#303 ABOVE CEILING NO SPRINK HEAD

2ND SPRINKLER BRANCH BROKEN OFF STAIRWELL

✓ #4 SPRINKLER BRANCH CUT OFF

#2 STOP WORK ORDER 4/25/00 9AM
ALL CONSTRUCTION
5 CONTRACTORS WORKING 1[45] 5/4/00

#1

OFF DAY CARE
STORAGE BLOCKING

DAY CARE
MARIANI MCINNORY - } NO NOTIFICATION ABOUT SPRINKLERS SHUT DOWN
TRACY MCGRATH -

OUTSIDE EXIT DOOR - NOT PLACARED
FIRE EXIT

TICKETS

SPRINKLER SYS SHUT DOWN NOTIFY

OCCUPANCY WITH NO C/O

LIST OF CONDITIONS CONSTITUTING VIOLATIONS OF THE MULTIPLE RESIDENCE LAW — Page 81

Order Number	Description of Condition(s)	Applicable Section of the Multiple Residence Law, or Rule of The Rules and Regulations	Classes of Multiple Dwellings to which the Violations Apply																			
			Existing building occupied as multiple dwelling on and after 7/1/521 1- or 2-family dwelling converted to a multiple dwelling after 7/1/52; existing multiple dwelling 3 or more stories altered in bulk or number of rooms after 7/1/53 where increase does not exceed 20%.				Existing multiple dwelling 3 or more stories altered after 7/1/53 where increase in bulk or number of rooms does exceed 20%.				Multiple dwelling erected after 7/1/52; building of non-dwelling occupancy converted to multiple dwelling after 7/1/52; multiple dwelling damaged by more than 2/3 of its value and rebuilt after 7/1/52.										
			Permanent Occupancy	Transient Occupancy			Permanent Occupancy	Transient Occupancy			Permanent Occupancy			Transient Occupancy								
			1 & 2 Stories	3 or more Stories	1 Story	2 Stories (persons not requiring care)	2 Stories (persons requiring care)	3 or more Stories	Fireproof	Non-Fireproof	Fireproof	Non-Fireproof	Fireproof	Non-Fireproof 1 & 2 Stories	Non-Fireproof 3 or more Stories	One Story		2 Stories (persons not requiring care)		2 Stories (persons requiring care)		3 or more Stories	
																Fireproof	Non-Fireproof	Fireproof	Non-Fireproof	Fireproof	Non-Fireproof	Fireproof	Non-Fireproof
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
	ADMINISTRATION																						
124	Failure to have the building registered with the department charged with enforcing the Multiple Residence Law.	300	✓	✓	✓	✓	✓	✓	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d	Note d
125	Failure to obtain a written permit from the department for the use of a space, or a structure on the premises of a multiple dwelling, for the storage of motor vehicles.	136							✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
126	Failure to obtain a certificate of occupancy from the department for the following buildings:- a) A multiple dwelling constructed after 7/1/52. b) A multiple dwelling existing on 7/1/52 and altered after that date. c) A building existing on 7/1/52 and converted to a multiple dwelling use after that date. d) A multiple dwelling existing on 7/1/52 where the department required such certificate.	302	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Plumbing installed after 7/1/52 in multiple dwellings existing on 7/1/52.																						

NOTES

Note a - Applicable only to nursing and convalescent homes, homes for aged, and boarding and nursing schools erected after 7/1/57, and to child-caring institutions erected after 7/1/62.

Note b - Applicable only to buildings of three or more stories.

Note c - Applicable only to fire escapes installed on and after 7/1/53.

Note d - Applicable only to buildings existing on 7/1/34.

NOTE

The list of conditions constituting violations of the Multiple Residence Law contained herein has been promulgated by the State Building Code Council pursuant to the provisions of Chapter 291 of the Laws of 1966. The Council was further directed to designate from this list, those conditions which it proposes to classify as rent impairing.

LIST OF CONDITIONS CONSTITUTING VIOLATIONS OF THE MULTIPLE RESIDENCE LAW

Order Number	Description of Condition(s)	Applicable Section of the Multiple Residence Law, or Rule of The Rules and Regulations		Classes of Multiple Dwellings to which the Violations Apply																			
				Existing building occupied as multiple dwelling on and after 7/1/52; 1- or 2-family dwelling converted to a multiple dwelling after 7/1/52; existing multiple dwelling 3 or more stories altered after 7/1/53 where increase in bulk or number of rooms does not exceed 20%.				Existing multiple dwelling 3 or more stories altered after 7/1/53 where increase in bulk or number of rooms does exceed 20%.				Multiple dwelling erected after 7/1/52; building of non-dwelling occupancy converted to multiple dwelling after 7/1/52; multiple dwelling damaged by more than 2/3 of its value and rebuilt after 7/1/52.									
				Permanent Occupancy		Transient Occupancy		Permanent Occupancy		Transient Occupancy		Permanent Occupancy			Transient Occupancy								
				1 & 2 Stories	3 or more Stories	1 Story	2 Stories (persons not requiring care)	2 Stories (persons requiring care)	3 or more Stories	Fireproof	Non-Fireproof	Fireproof	Non-Fireproof	Fireproof	Non-Fireproof 1 & 2 Stories	Non-Fireproof 3 or more Stories	One Story		2 Stories (persons not requiring care)		2 Stories (persons requiring care)		3 or more Stories	
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
	WINDOWS AND VENTILATION IN STAIRWAYS, SHAFTS, HALLWAYS & VESTIBULES (Continued)																						
30	Lack of exterior windows in a stairway, or a stairwell at least 16" wide extending to the roof in three-story buildings having not more than two families per story.	257(5a)									✓					✓							
31	Lack of exterior windows in a stairway, or a stairwell at least 6" wide extending to the roof in two-story buildings having not more than two families per story.	257(5b)														✓							
	EGRESS FROM APARTMENTS AND SUITES																						
32	Lack of a second means of egress from each apartment or suite where the first means of egress is more than 40 feet from any living room in such apartment or suite.	203(1)								✓		✓		✓				✓		✓		✓	
33	The two required means of egress from each apartment or suite are not sufficiently remote from each other.	255(1)									✓		✓			✓							✓
34	Egress from apartment or suite opens directly into a stairway and fails to provide an intervening vestibule or public hall.	203(2)								✓		✓		✓				✓		✓		✓	
	Plumbing installed after 7/1/52 in multiple dwellings existing on 7/1/52.																						

PART 1153

DANGEROUS OR UNSAFE BUILDINGS OR STRUCTURES

(Statutory authority: Executive Law, §§375, 377)

Sec.

1153.1 General requirements

Historical Note

Part (§§1153.1-1153.6) filed June 9, 1976; repealed by L. 1981, ch. 707, § 12, eff. Dec. 31, 1983; new (§ 1153.1) filed Dec. 13, 1983 eff. Jan. 1, 1984.

§ 1153.1 General requirements.

(a) A building or structure which is in imminent danger to life and safety as a result of structural instability, fire, explosion or other hazardous situation shall be made safe and secure or demolished and removed by the owner thereof.

(b) The occupants of any such building or structure shall vacate the premises forthwith. No person shall use or occupy such building or structure until it is deemed safe and secure by the code enforcement official.

(c) Except for the owner, no person shall enter premises which have been ordered vacated unless authorized to perform inspections, repairs, or to demolish and remove such building or structure.

Historical Note

Sec. filed June 9, 1976; repealed by L. 1981, ch. 707, § 12, eff. Dec. 31, 1983; new filed Dec. 13, 1983 eff. Jan. 1, 1984.

§ 1153.2-1153.6

Historical Note

Secs. filed June 9, 1976; repealed by L. 1981, ch. 707, § 12, eff. Dec. 31, 1983.

PART 1154

VACANT BUILDINGS OR STRUCTURES

(Statutory authority: Executive Law, §§375, 377)

Sec.

1154.1 Requirements

Historical Note

Part (§§1154.1-1154.3) filed June 9, 1976; repealed by L. 1981, ch. 707, § 12, eff. Dec. 31, 1983; new (§ 1154.1) filed Dec. 13, 1983 eff. Jan. 1, 1984.

§ 1154.1 Requirements.

Every person owning or having charge or control of any building which has been vacant for over 60 days shall remove all combustible waste and refuse therefrom and lock, barricade, guard continuously or otherwise secure all windows, doors and other openings in the building to prohibit entry by unauthorized persons.

Historical Note

Sec. filed June 9, 1976; repealed by L. 1981, ch. 707, § 12, eff. Dec. 31, 1983; new filed Dec. 13, 1983 eff. Jan. 1, 1984.

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 98 - 00186

ADDRESS: GOODMAN ST N | FROM / TO: ~~3~~ 302 | TAX ACCT #: 005000-03-0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	549	2	2

NO ENTRY DATES:
5/6 11am
07/10
07/15

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: PYRAMID ARTS CENTER | PHONE:
BUSINESS OWNER: ~~LAWRENCE~~ ELIZABETH McDADE
ADDRESS: ~~D301~~ 204 | ROCHESTER NY 14607
PHONE: 461 2222
BUSINESS EMERGENCY: ~~LAWRENCE~~ ELIZABETH McDADE 14620
ADDRESS: ROCHESTER NY
13 HICKORY ST. | PHONE: ~~262-3356~~

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☐ NO VIOLATIONS NOTED AT THIS TIME				
OFFICE AREA	IMPROPER USE OF EXTENSION CORDS, EXTENSION CORDS ARE FOR TEMPORY USE ONLY.			X 09/13	
FURNACE ROOM	OPEN JUNCTION BOX ABOVE PANEL BOX IN NEED OF COVER.				
PANEL BOX	OPENINGS IN PANEL IN NEED OF BLANK.			X 10/09	
GALLERY AREA	IMPROPER USE OF EXTENSION CORD, USED TO POWER LIGHTS			X 09/13	
	LIGHTS HANGING FROM SPRINKLER SYSTEM, MUST BE REMOVED.			X	
	FILE				

OFFICER PREPARING REPORT: LT. S. MURRAY | COMPANY: A1 | DISTRICT: 3 | GROUP: 3 | DATE: 07/16/98

BUS/PROP REPRESENTATIVE: [signature] | POSITION / TITLE | DATE OF REINSPECTION

FIRE SAFETY INSPECTOR: | DATE

RFD 501 REV. 12/97

COPY TO FIRE SAFETY

STATE OF NEW YORK
DEPARTMENT OF STATE
ALBANY, NY 12231-0001

FILE
07-02-98

ALEXANDER F. TREADWELL
SECRETARY OF STATE

WESTERN REGION BOARD OF REVIEW

In the Matter of the Petition of:
Village Gate
For a Variance to the New York State
Uniform Fire Prevention & Building Code

DECISION

PETITION NO. 406-97-28
RE-OPEN

Upon the application of Village Gate, filed pursuant to 19 NYCRR 450 on June 4, 1997, and upon taking testimony and hearing argument thereon at a duly noticed hearing before the Western Region Board of Review held at 1530 Jefferson Road, Rochester, New York, on March 12, 1998, and upon all other papers in this matter, the Board makes the following determination:

NATURE OF GRIEVANCE AND RELIEF SOUGHT

The petition pertains to the conversion of the 3rd and 4th story of an existing 4 story building to apartments (B-1 multiple residence). The building currently has (2) C-5 (assembly occupancy) nightclubs located on the 2nd story . The building is constructed of Type 3(heavy timber) construction and has a gross area of approximately 42,388 square feet. The property is located at 302 North Goodman Street, in the City of Rochester, County of Monroe, State of New York.

The petitioner is seeking relief from:

* **9 NYCRR 705.3(a), Table II-705:** Requirements that limit the fire area to a maximum of 7,500 square feet, including 50% increase in fire area due to accessibility on 2 sides of the building.

NOTE: This petition was originally heard and denied at the June 1997 meeting of this Board. Additional information has been submitted from the City of Rochester and Department of State regarding interpretation and application of Section 1233 concerning conversions. A motion was made to re-open this petition and passed with a 4-0 vote.

printed on recycled paper

FINDINGS OF FACT

1. The petitioner has requested that the petition be amended to include a conversion of the 2nd floor from C1/C5 occupancies to B1 occupancies.
2. The building is equipped with a required sprinkler system which must meet the requirements of NFPA 13.
3. The building is equipped with a required fire and smoke detection system.
4. The petitioner's proposal to provide an exterior steel stairway is required to be provided to prevent a dead end corridor and is not an alternative to code compliance.
5. There is access on 2 sides of the building. On the 2 remaining sides of the building, there are located various incidental obstructions which, if removed, would allow an additional increase to the basic fire area. Access to the south side would improve the accessibility for emergency services, and would reduce the degree of variance from the Uniform Code to minimal area.
6. The petitioner has agreed to restrict the use of the south side of the property to maintain a 420 feet clear access way for firefighting purposes, and to file such an agreement with the deed.

CONCLUSIONS OF LAW

With respect to **9 NYCRR 705.3(a), Table II-705**, strict compliance with the provision of the Uniform Fire Prevention and Building Code would entail practical difficulty or unnecessary hardship and would entail a change so slight as to produce a negligible additional benefit consonant with the purposes of the Code.

DETERMINATION

WHEREFORE IT IS DETERMINED that the application for variance from 9 NYCRR 705.3(a), Table II-705, be and is hereby GRANTED with the following conditions:

1. That the new steel exterior stairway shall be code compliant and shall provide access to the roof as described by the petitioner.
2. That the deed restriction as defined in the findings be filed with the appropriate authority.

Furthermore, it should be noted that the decision of this Board is limited to the specific building and application before it, as contained within the petition, and should not be interpreted to give implied approval of any general plans or specifications presented in support of this application.

Acting Chairman , William Scott Copp, James W. Ray, Jr., and Thomas R. Tyson concur.

Member Stephen J. Trenton was recused due to enforcement responsibilities in the jurisdiction of the petition.

So ordered.

Western Region Board of Review

W. Scott Copp

By: W. Scott Copp, Acting Chairman
Date:

TPM:sg

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 98 - 00196

ADDRESS: GOODMAN ST N 302 | FROM / TO | TAX ACCT #

PROPERTY OWNER | ADDRESS | PHONE

CITY | STATE | ZIP 000-0000

MAILING NAME | ADDRESS | PHONE

CITY | STATE | ZIP

EMERGENCY CONTACT: ED SCHEMINGER | ADDRESS: 217 KINGSBORO RD | PHONE: 235-1497

CITY: ROCHESTER | STATE: NY | ZIP: 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	522	2	

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: DR. MICHAEL MIRAN, PHD. | PHONE

BUSINESS OWNER

ADDRESS | PHONE

BUSINESS EMERGENCY: DR. MICHAEL MIRAN

ADDRESS: 272 SYLVAN RD ROCHESTER NY14618 | PHONE: 473 9770

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	☒ NO VIOLATIONS NOTED AT THIS TIME				

FILE

OFFICER PREPARING REPORT: LT [illegible] | COMPANY: A1 | DISTRICT: B3 | GROUP: 4 | DATE: 6/1/98

BUS/PROP REPRESENTATIVE: Bella Jennings | POSITION / TITLE | DATE OF REINSPECTION

FIRE SAFETY INSPECTOR: | DATE

RFD 501 REV. 12/97

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 08862

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES: 8/21 @ 1000 hrs.

BUSINESS NAME: TELECOMMUNICATIONS BANK | PHONE:
BUSINESS OWNER: PERRY BANKS
ADDRESS: E207 ROCHESTER NY14607
PHONE: 442 2040

BUSINESS EMERGENCY:
ADDRESS: | PHONE:

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY: REFERRED | ORDERS ISSUED | CORRECTED | NOT REQUIRED

DIRECTION ROOM #, ETC.	COMPLAINT
	NO VIOLATIONS AT TIME OF INSP

FILE

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Lt D Mayer	A-I	3	1	9-25-96
BUS/PROP REPRESENTATIVE: Perry L. Banks	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08860

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES — GENERAL PROPERTY USE: 51 — SPECIFIC PROPERTY USE: — STRUCTURE TYPE: 2 — STRUCTURE STATUS: 3

NO ENTRY DATES:

BUSINESS NAME: SCHWARZ RALPH C & SONS IN — PHONE:
BUSINESS OWNER: JAMES SCHWARZ
ADDRESS: E309 ROCHESTER NY14607
PHONE: 271 4696
BUSINESS EMERGENCY: JAMES SCHWARZ
ADDRESS: 165 GLEN ELLYN WY ROCHESTER NY14618
PHONE: 473-6521 461-1239

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Violations at time of Inspection				

FILE

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
L.T. James Ryan	Att. 1	B3	1	8/21/96
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
[signature]	Acct. Exec			8/21/96
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

NORMA JEAN'S RESTAURANT
302 North Goodman St.
Rochester, NY 14607

September 5, 1995

Hon. William Johnson
City of Rochester
City Hall
Rochester, NY 14614

Dear Mayor:

It is with great pride and gratification that I extend this sincere expression of appreciation for the high level of cooperation by the Rochester Fire Department officials in their dealings with us in matters affecting the patrons, management and employees of *Norma Jean's* Restaurant in the Village Gate business complex.

It was their genuine concern, counsel and advise that facilitated compliance matters quickly and efficiently.

We are especially gratified to have become such a viable and exciting place for food and entertainment, to no small degree the result of support received from the city, the neighboring community, other business establishments and landlord of Village Gate.

We especially appreciate the excellent cooperative and understanding spirit of the Fire Department that helped us become an exciting business entity as we attract an increasing number of patrons from throughout the area, the city as well as the suburbs.

Our plans for the future include lasting growth and building a formidable cooperative relationship with all the Village Gate merchants, some 100 strong, in a concentrated effort to continue improving our business posture by serving the community the best we can.

Again, please accept our special thanks and loud applause to the men and women of the Fire Department in helping us create a favorable presence in this area.

Sincerely,

Ben

BENJAMIN GOODMAN
President

BG/os

c: Deputy Mayor Jeffrey Carlson
Fire Chief David Griffith
Deputy Fire Chief Raynaldo Tovar

FILE

FD570

FIRE SAFETY INSPECTION RECORD

A/E INSPECTION

LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION 302 N Goodman Ralph Schwarz and Sons

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
9-12-95								ok at Time of Insp	X	AMcL

FILE

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08252

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME SCHWARZ RALPH C & SONS IN PHONE
BUSINESS OWNER JAMES SCHWARZ
ADDRESS E309 ROCHESTER NY14607
PHONE 271 4696
BUSINESS EMERGENCY JAMES SCHWARZ
ADDRESS 165 GLEN ELLYN WY ROCHESTER NY14618
PHONE 473 6521

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION: A/E INSPECTION

DISPOSITION by FIRE SAFETY: REFERRED | ORDERS ISSUED | CORRECTED | NOT REQUIRED

DIRECTION ROOM #, ETC.	COMPLAINT
	OK At Time of Insp

OFFICER PREPARING REPORT: | COMPANY | DISTRICT | GROUP | DATE

BUS/PROP REPRESENTATIVE: President | POSITION / TITLE | DATE

FIRE SAFETY INSPECTOR: Albert Mele | DATE 9-12-95

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 N Goodman Telecommunications

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
9-12-95								ok at Time of Insp	X	Amels

FILE

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 08256

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME TELECOMMUNICATIONS BANK T PHONE
BUSINESS OWNER PERRY BANKS
ADDRESS E207 ROCHESTER NY14607
PHONE 442 2040

BUSINESS EMERGENCY
ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION **A/E INSPECTION**

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	OK at Time of Insp				

OFFICER PREPARING REPORT:		COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:		POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:	Albert Mele				DATE 9-12-95

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

STATE OF NEW YORK
DEPARTMENT OF STATE
ALBANY, NY 12231-0001

ALEXANDER F. TREADWELL
SECRETARY OF STATE

FILE
E-8-97
302 N. Goodman

NOTICE OF HEARING

NYS UNIFORM FIRE PREVENTION AND
BUILDING CODE BOARDS OF REVIEW

In the matter of the petition of:
Gary Stern
274 North Goodman Street
Rochester New York 14692
for relief related to the New York State
Uniform Fire Prevention and Building Code

Petition No. 406-97-28

Sir or Madam:

Pursuant to 19 NYCRR, Part 450, a hearing on the petition identified above has been scheduled before the Western Region Uniform Code Board of Review at 9:00 a.m. on Thursday, June 12, 1997, in the 3rd floor classroom #334A in the New York State Department of Transportation, 1530 Jefferson Road, Rochester, New York. Please be advised that all morning hearings are scheduled for 9:00 a.m. The hearings will proceed in order at the call of the Chairman.

You may appear in person or be represented by counsel and may have the privilege of presenting such witnesses as you desire. If you fail to appear, the hearing will be conducted in your absence. Your participation in this hearing can contribute to a better understanding of the issues before the Board.

If you are represented by counsel, Section 166 of the Executive Law requires your attorney to file a Notice of Appearance with this office and state, therein whether or not he is being compensated for such advocacy.

You may review the petition at the Department of State office in Albany, New York, or additional office(s) by arrangement. Direct inquiries to Bryan Manning (518) 474-4073, or write to "Codes Division", 41 State Street, Albany, NY 12231.

Attached to this notice is a brief description of the building and the relief sought.

DATED: June 2, 1997

BK:mo

printed on recycled paper

406-97-28 Matter of Randall F. Peacock, AIA, 212 Inglewood Drive, Rochester, NY 14619, for a variance concerning fire-safety requirements, including fire area.

Involved is the conversion of the 4th floor to apartments in an existing building of mixed C5 & C1 occupancies, four stories in height, of heavy timber construction, approximately 42,388 square feet in gross area, known as "Village Gate Square", at 302 N. Goodman Street, City of Rochester, Monroe County, New York.

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

3rd Floor

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

INSPECTION # 13995

COMPANY A01

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	~~274~~ 302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	152	2	2

NO ENTRY DATES:
8-19-97

BUSINESS NAME WHITE SCHOOL OF BALLET PHONE
BUSINESS OWNER PAMELA S WIKENS WHITE
ADDRESS E201 ROCHESTER NY14607 PHONE
BUSINESS EMERGENCY
ADDRESS PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO COMPLAINT AT TIME OF INSP.				
	Inspect after 400				

FILE

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Lt D Mayer	A-1	3	1	09/23/97
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FIRE SAFETY INSPECTION RECORD

[E] LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 N. GOODMAN ST

SPRINKLER SYSTEMS

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OK TO FILE	INSPECTOR
DEC 17 1996									
12/18/96							X	X	AR

Sphkln report attached

FILE

AUTOMATIC SPRINKLER AND STANDPIPE INSPECTION CHECK LIST

Company Officer: L. D. Mayer Company/Group: A-1, 1 Date: 9-25-96

GENERAL INFORMATION:

1. Building Address: 302 N. Broadman
2. Is this system operational: Yes ✓ No _____
   If "No" forward this report to the Fire Safety Office immediately.
3. Date of last inspection (ask for inspection report) _____
4. Name of inspection company: _____

TYPE OF SYSTEM:

1. SPRINKLER: Wet ✓ Dry _____ Other _____
   If "Other" explain:
   _____
2. If dry pipe system, is dry pipe valve in a heated room? Yes _____ No _____
3. Standpipe: Wet _____ Dry ✓ None _____

INSIDE INSPECTION:

1. Location of shut-off valves & main control valve:
   MID BLDG COURT YARD SIDE
2. How are the valves supervised:
   Locked ✓ Tamper Switch _____ None _____
3. Are valves identified with signs? Yes _____ No ✓
4. Is main control valve room identified with signs? Yes _____ No _____
5. Is the piping and/or heads in need of repair? Yes _____ No ✓
6. Pressure gages operational? Yes ✓ No _____
7. Outside stem and yoke? Yes _____ No _____
8. Location of OS&Y: _____

(OVER)

OUTSIDE INSPECTIONS:

STAND PIPE

Location of the following:

1. Fire Department connections: FRONT OF BLDG MID BLDG INSIDE
   MID BLDG COURTYARD SIDE. [redacted] + NW COR. OUTSIDE
   a. Is this a looped system? (Interconnected by multiple siamese connections?)
      Yes ✓ No ✓
2. Post indicator valves: Open _____ Shut _____ None ✓
3. Location of P.I.V:
   _____
4. Is the PIV wrench attached and locked? Yes _____ No _____
5. Yard hydrants: Yes ✓ No _____
6. Location of yard hydrants:
   FRONT COURT YARD
7. Are the Fire Department siamese properly identified? Yes _____ No ✓
8. Water supply tanks: Yes _____ No ✓

THREADS:

1. Are all threads national standard?
   Inside: Yes ✓ No _____ Outside: Yes _____ No _____
2. Do the Fire Department connections have caps on them? Yes ✓ No ✓

FIRE PUMPS:

1. Fire Pump: Yes _____ No ✓
2. Location of fire pumps: _____
3. Date of last inspection: (ask for inspection report) _____
4. Name of inspection company: _____

CASSIDY MECHANICAL CORP.
11 COMFORT STREET
ROCHESTER, NEW.YORK 14620
(716) 232-2000
Fax 232-7814

REPORT OF INSPECTION

Property Inspected VILLAGE GATE SQUARE - ROCHESTER N.Y.

Month of Inspection AUGUST Date of Inspection 4 AUG 95

	YES	NO	N/A
1. GENERAL			
A. Is the building occupied?	✓	---	---
B. Are all systems in service?	✓	---	---
C. In areas protected by wet system, does the building appear to be properly heated in all areas?	✓	---	---
D. Does the hand hose on the sprinkler system appear to be satisfactory?	---	---	✓
E. Is there a control valve location Map at riser?	---	---	✓
2. CONTROL VALVES			
A. Are all sprinkler system control valves and all other valves in the appropriate open or closed position?	✓	---	---
B. Are all control valves in the open position and locked, sealed or equiped with a tamper switch?	---	(✓)	---
3. WATER SUPPLIES ...STATIC PSI ___ (See Last Pg.) RESIDUAL PSI ___			
A. Was a water flow test of main drain made at the sprinkler riser?	✓	---	---
4. TANKS, PUMPS, FIRE DEPARTMENT CONNECTIONS			
A. Are fire pumps, gravity tanks, reservoirs and pressure tanks in good condition and properly maintained?	---	---	✓
B. Are fire department connections in satisfactory condition, couplings free, caps in place and check valves tight?	---	(✓)	---
Are they accesible and visible?	✓	---	---
5. WET SYSTEMS			
A. Are cold weather valves (O.S.& Y.) in the appropriate open or closed position?	---	---	✓
B. Have antifreeze system solutions been tested?	---	---	✓
C. Were the antifreeze test results satisfactory?	---	---	✓

CASSIDY MECHANICAL CORP.
11 COMFORT STREET
ROCHESTER, NEW YORK 14620
(716) 232-2000
Fax 232-7814

REPORT OF INSPECTION

	YES	NO	N/A
6. DRY SYSTEM			
A. Is the dry valve in service?	✓	---	---
B. Are the air pressure and priming water level in accordance with the manufacturer's instructions?	✓	---	---
C. Has the operation of the air or nitrogen supply been tested?	---	✓	---
Is it in service?	✓	---	---
D. Were low points drained during this inspection?	---	✓	---
E. Did quick-opening devices operate satisfactorily?	---	---	✓
F. Did the dry valve trip properly during the trip pressure test?	---	---	✓
G. Did the heating equipment in the dry-pipe valve room operate at the time of inspection?	✓	---	---
7. SPECIAL SYSTEMS			
A. Did the deluge or pre-action valves operate properly during testing?	---	---	✓
B. Did the heat-responsive devices operate properly during testing?	---	---	✓
C. Did the supervisory devices operate during testing?	---	---	✓
8. ALARMS			
A. Did water motor and gong test satisfactorily?	---	---	✓
B. Did electric alarm test satisfactorily?	✓	---	---
C. Did supervisory alarm service test satisfactorily?	---	(✓)	---
9. SPRINKLERS			
A. Are all sprinklers free from corrosion, loading or obstruction to spray discharge?	✓	---	---
B. Are sprinklers over 50 years old, thus requiring sample testing?	---	✓	---
C. Is stock of spare sprinklers available?	---	(✓)	---
D. Does the exterior condition of sprinkler system appear to be satisfactoy?	---	(✓)	---
E. Temperature: Are sprinklers of proper temperature ratings for their location?	✓	---	---

CASSIDY MECHANICAL CORP.
11 COMFORT STREET
ROCHESTER, NEW YORK 14620
(716) 232-2000
Fax 232-7814

REPORT OF INSPECTION

10. Date dry-pipe valve trip tested (control valve partially open)
1994

11. Date dry-pipe valve trip tested (control valve fully open)
1994

12. Date quick-opening device tested N/A

13. Date deluge or preaction valve tested N/A

RECOMMENDATIONS:

(WET) 1ST FLOOR BLDG. A ZONE #1 - TAMPER SWITCH NEEDS HOOKING UP

(WET) 1ST FLOOR BLDG. B RISER #3 - 2" MAIN DRAIN VA. NEED SERVICE (STUCK)

(WET) 1ST FLOOR BLDG. B RISER #4 - 2" MAIN DRAIN LEAKS (PLASTIC), ALSO DRAIN IS CEMENTED IN BY SIDEWALK NEED TO REPAIR.

(WET) MONTAGE REPROGRAPHICS 1ST FLOOR BLDG C RISER #5 - 2" MAIN DRAIN STUCK - NEEDS SERVICE

(WET) 1ST FLOOR BLDG C RISER #6 - 2" MAIN DR. STUCK - NEEDS SERVICE,

(WET) E. END 1ST FLOOR BLDG C RISER #7 - 2" MAIN DR. STUCK - NEEDS SERVICE

(WET) EAST LOBBIES 1ST FLOOR BLDG D RISERS #9 - PRIVATE PROPERTY "ALARMED" CAN'T GET IN

(WET) 1ST FLOOR BLDG. D RISER #8 - OK

(WET) BLDG. 302 FLOW SWITCH DOESN'T WORK (REPAIR OR REPLACE)

BLDG. 302 FDC - CAP MISSING - REPLACE

176 ANDERSON ST. - WATER GAGE BROKEN, NEEDS CHAIN & LOCK ON OS&Y VA., PROSS SW. & FLOW SWITCH NOT HOOKED UP - SPKLR. HDS ARE COVERED FOR PAINTING - NEED TO REMOVE COVERING.
(DRY)

(DRY) 176 ANDERSON ST. - NEEDS CHAIN & LOCK ON OS&Y VA. - SPKLR BR. LINE BROKEN & PLUGGED, NEEDS REPAIRING
SUPERIOR LUBRICATION

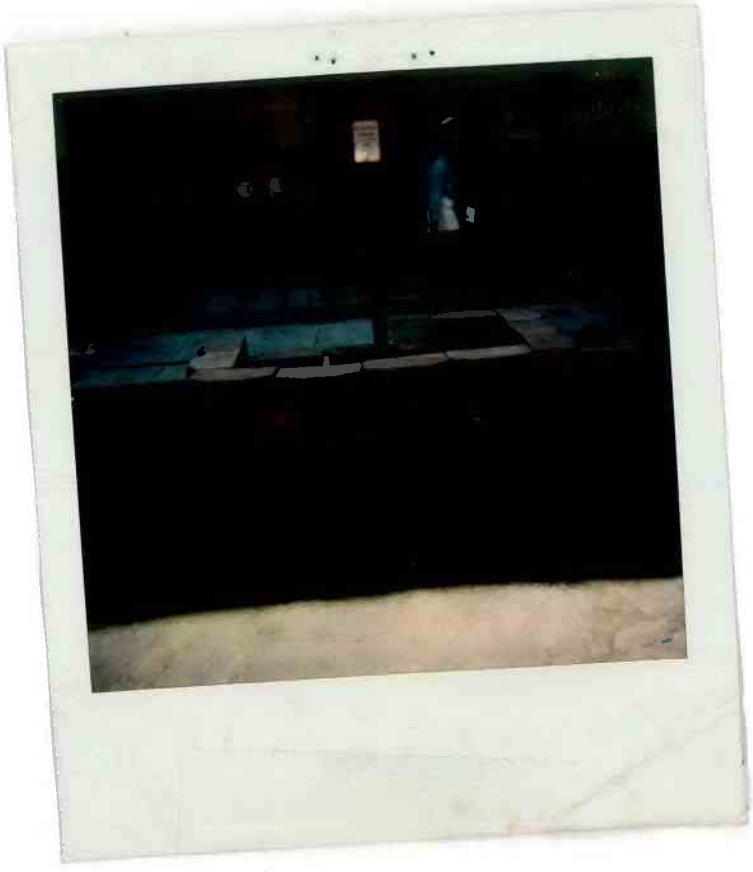
NEED SPARE HEAD BOX AND SPARE HDS + WRENCH @ EA. RISER

Cassidy Mechanical Corp. Fire Pro Division
Signature Joseph F. Snowden

RISER FLOW TESTS

	STATIC	RESIDUAL
BLDG "A" RISER #2	55	50
BLDG "B" RISER #3	NO FLOW TEST - 2" MAIN DRAIN STUCK	
BLDG "B" RISER #4 (ACROSS FROM MARIAS RESTAURANT)	60	65
BLDG "C" RISER #5	NO FLOW TEST - 2" MAIN DRAIN STUCK	
BLDG "D" RISER #8	58	50
BLDG 302	58	54
176 ANDERSON ST.	100	94
176 ANDERSON ST. SUPERIOR LUBE.	100	95

NORMA JEAN'S
REST.
1995



NORMA JEAN'S RESTAURANT
302 N. Goodman Street
Rochester,NY 14607

September 1, 1995

Raymond Tovar
Fire Marshall
City of Rochester
Public Safety Building
Rochester, New York

Dear Fire Marshall:

This to affirm our intention to fully comply to City of Rochester fire codes as they relate to outdoor fires, specifically to the outside grill to roast hot dogs and marshmallows.

As discussed with Lt.O.D. Eisenhart, here is what we intend to do do to insure safety and comply with codes (1191.2 Exterior protection):

1. Will provide at location a 20 lb, ABC fire extinquisher.
2. Charcoal bricketts or logs will be used, depending on wind factor.
3. Sign of caution will be posted as required.
4. Proper utensils will be used.
5. Attendant will be on duty during use.

Sincerely,

B. J. Goodman Pres.
BENJAMIN GOODMAN
President

APPROVED BY
FIRE MARSHAL
09-01-95

(3) dispose of hot or smoldering materials, including hot ashes or cinders, or smoldering coals, in other than noncombustible receptacles. Such receptacles, unless resting on a noncombustible floor or on the ground in an exterior open area, shall be placed on noncombustible stands at least two feet laterally away from combustible materials, structures and exterior openings of buildings;

(4) use or operate any internal combustion equipment or flame-producing device unless suitable measures are taken to ensure against ignition of combustibles.

(c) Where conditions are such as to make smoking a hazard, the local code enforcement official is authorized to order the owner or occupant, in writing, to post "NO SMOKING" signs in the specified areas. The lettering, size, color and location of the "NO SMOKING" sign shall be determined by the code enforcement official.

(d) It shall be unlawful for any person to smoke or throw or deposit any lighted or smoldering substance in any place where "NO SMOKING" signs are posted, or in any other place where smoking would constitute a fire or life hazard.

(e) No person shall knowingly maintain a fire hazard.

Historical Note

Sec. filed Dec. 13, 1983 eff. Jan. 1, 1984.

1191.2 Exterior protection. (a) *Dry vegetation, combustible waste and refuse.* Combustible waste, refuse and large quantities of dry vegetation which, by reason of their proximity to buildings or structures, would constitute a fire hazard or contribute to the spread of fire, shall be removed.

(b) *Obstructions.* It is prohibited to:

(1) install or maintain wires, cables, ropes, aerial antennas or other overhead obstructions on the roofs of buildings having a roof slope of less than 30 degrees, unless there is a full clearance of seven feet or more between the roof surface and such obstruction; except that obstructions may be installed less than seven feet high provided they are protected in a manner to prevent injury to firefighters working on the roof during periods of reduced visibility;

(2) maintain or allow on roofs and fire escapes materials or objects which obstruct or could obstruct egress or fire department access;

(3) attach or fasten ropes, wires, cables or similar devices, except standard equipment therefor, to fire escapes;

(4) place or permit objects or materials to obscure or obstruct the use of fire hydrants and fire department connections.

(c) *Outdoor fires.* (1) Outdoor fires, including bonfires and rubbish fires, shall not be permitted unless legally authorized and in conformity with forest fire control regulations.

(2) Outdoor fires, where permitted, shall be attended at all times, with appropriate fire-extinguishing equipment readily available.

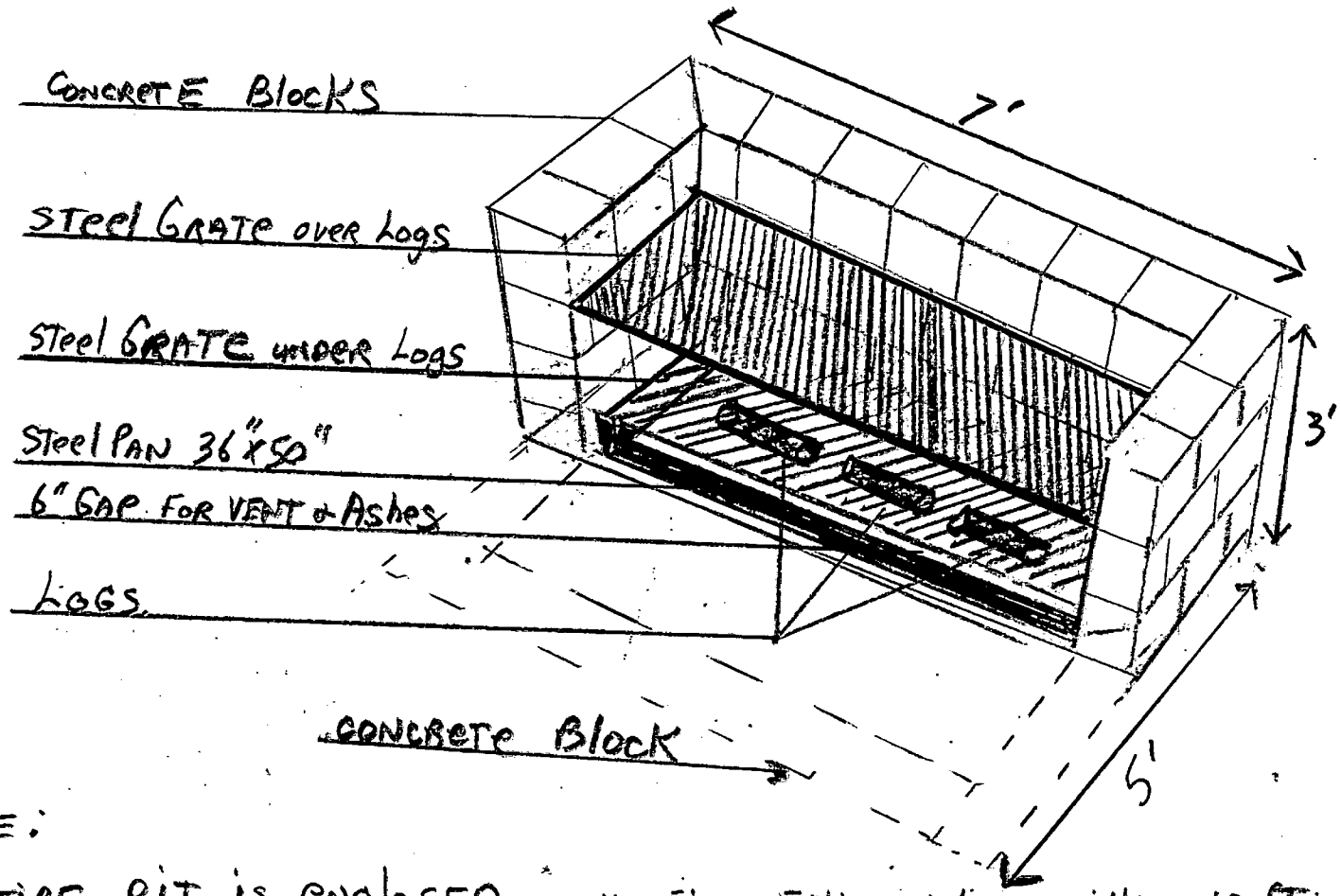
(3) The local fire department and code enforcement official shall be notified whenever outdoor burning is being conducted. Notification shall include such information as time and location.

NORMA JEANS RESTAURANT
302 N. GOODMAN ST
Village Gate Sq.
Rochester N.Y. 14607

442-9478

FIRE GRILL - OUTSIDE ((COOKING HOT DOGS & MARSHMELLOWS)

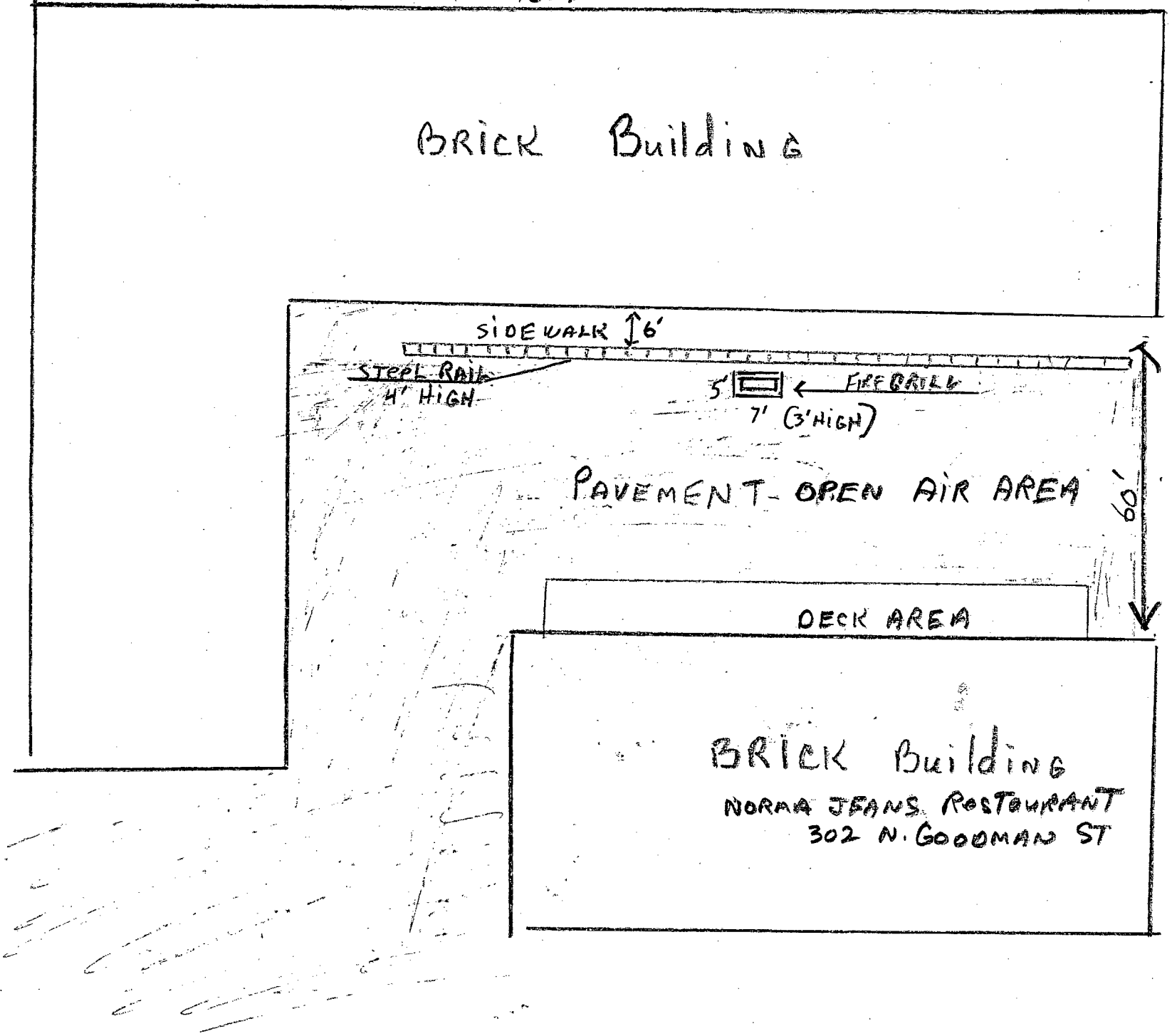
CROSS SECTION VIEW



NOTE:

* ENTIRE PIT IS ENCLOSED with CONCRETE BLOCK
* FIRE EXTINGUISHER within 10 FT
* ATTENDANT supervising

NORMA JEAN'S RESTAURANT
302 N GOODMAN ST. ROCH. N.Y. 14607



N. GOODMAN ST

(3) dispose of hot or smoldering materials, including hot ashes or cinders, or smoldering coals, in other than noncombustible receptacles. Such receptacles, unless resting on a noncombustible floor or on the ground in an exterior open area, shall be placed on noncombustible stands at least two feet laterally away from combustible materials, structures and exterior openings of buildings;

(4) use or operate any internal combustion equipment or flame-producing device unless suitable measures are taken to ensure against ignition of combustibles.

(c) Where conditions are such as to make smoking a hazard, the local code enforcement official is authorized to order the owner or occupant, in writing, to post "NO SMOKING" signs in the specified areas. The lettering, size, color and location of the "NO SMOKING" sign shall be determined by the code enforcement official.

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(3) The local fire department and code enforcement official shall be notified whenever outdoor burning is being conducted. Notification shall include such information as time and location.

NORMA JEAN'S RESTAURANT
302 North Goodman St.
Rochester, NY 14607

September 5, 1995

Hon. William Johnson
City of Rochester
City Hall
Rochester, NY 14614

Dear Mayor:

It is with great pride and gratification that I extend this sincere expression of appreciation for the high level of cooperation by the Rochester Fire Department officials in their dealings with us in matters affecting the patrons, management and employees of *Norma Jean's* Restaurant in the Village Gate business complex.

It was their genuine concern, counsel and advise that facilitated compliance matters quickly and efficiently.

We are especially gratified to have become such a viable and exciting place for food and entertainment, to no small degree the result of support received from the city, the neighboring community, other business establishments and landlord of Village Gate.

We especially appreciate the excellent cooperative and understanding spirit of the Fire Department that helped us become an exciting business entity as we attract an increasing number of patrons from throughout the area, the city as well as the suburbs.

Our plans for the future include lasting growth and building a formidable cooperative relationship with all the Village Gate merchants, some 100 strong, in a concentrated effort to continue improving our business posture by serving the community the best we can.

Again, please accept our special thanks and loud applause to the men and women of the Fire Department in helping us create a favorable presence in this area.

Sincerely,

Ben

BENJAMIN GOODMAN
President

BG/os

c: Deputy Mayor Jeffrey Carlson
Fire Chief David Griffith
Deputy Fire Chief Raynaldo Tovar

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 N Goodman Screen Scene Inc.

DATE RECEIVED IN FIRE SAFETY: / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
9-12-95								OK at Time OR Insp	X	A Mels

FILE

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08253

ADDRESS GOODMAN ST N FROM / TO 302 TAX ACCT #

PROPERTY OWNER ADDRESS PHONE 000-0000

CITY STATE ZIP

MAILING NAME ADDRESS PHONE

CITY STATE ZIP

EMERGENCY CONTACT ED SCHEMINGER ADDRESS 217 KINGSBORO RD PHONE 235-1497

CITY STATE ZIP 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME SCREEN SCENE, INC PHONE

BUSINESS OWNER ED SCHEMINGER

ADDRESS SUITE 303

PHONE 244 6400

BUSINESS EMERGENCY ~~ED SCHEMINGER~~ Adam BAZOE

ADDRESS ~~217 KINGSBORO RD~~ ROCHESTER ~~NY 14619~~ 14611

1349 Goeser St. Rochester PHONE ~~235-1497~~ 328-0387

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION A/E INSPECTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	OK at Time of Insp				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE Genl Mgr.			DATE 9-6-95
FIRE SAFETY INSPECTOR: albert mch				DATE 9-12-95

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

08861

COMPANY A01 | INSPECTION #

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #

PROPERTY OWNER | ADDRESS | PHONE 000-0000

CITY | STATE | ZIP

MAILING NAME | ADDRESS | PHONE

CITY | STATE | ZIP

EMERGENCY CONTACT: ED SCHEMINGER | ADDRESS: 217 KINGSBORO RD | PHONE: 235-1497

CITY | STATE | ZIP: 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:
8/21 @ 1000 hrs.
9/25 1430

BUSINESS NAME ~~SCREEN SCENE, INC~~ Dr. Michael Miran PHD | PHONE

BUSINESS OWNER ~~ED SCHEMINGER~~ S.A.A.

ADDRESS SUITE 303 | PHONE 473-9770 ~~244-6400~~

BUSINESS EMERGENCY ~~ED SCHEMINGER~~ Dr. Michael Miran | Brighton NY 14618

ADDRESS ~~217 KINGSBORO RD~~ 272 Sylvan Rd | ~~ROCHESTER NY 14619~~ | PHONE ~~235-1497~~

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Violations at time of inspection				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Ed Mayer	A-1	3	1	10/31/96
BUS/PROP REPRESENTATIVE: x Bella Jennings	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N. GOODMAN ST

DATE RECEIVED IN FIRE SAFETY: 95 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6/1/95	C	RUSS LORIA						NORMA JEANS A/E INSPECTION	X	QD

NEW INFORMATION

FILE

☐ RENEWAL (prev # ____)

$50.00

CITY OF ROCHESTER
BUREAU OF TREASURY
100A CITY HALL
ROCHESTER, NY 14614

LIC# _____
ISS _____
EXP _____

LICENSE APPLICATION

(Indicate license type with an "X")

☐ AMUSEMENT CENTER ☒ ENTERTAINMENT CENTER sq ft 2400 under seating ____ ☒ DANCE

APPLICANT: Benjamin T. Goodman (full name) | 546-5513 (phone) DATE OF BIRTH: 10 | 12 | 71

91 Richmond St. (residence # street) | Rochester (city) | NY (state) | 14607 (zip)

ACTIVITY: (describe) Restaurant

NOTE: If the APPLICANT or PROPERTY OWNER is a partnership, give name, D.O.B. & home address of each partner; if a corporation, give name, D.O.B. & home address of all officers and shareholders; if d.b.a., give name, D.O.B. & home address of principals. (use back side if needed)

PROP OWNER: Mitch Stern (full name) | 442-9061 (phone) DATE OF BIRTH: 7 | 4 | 69

274 N. Goodman St. (residence # street) | Rochester (city) | NY (state) | 14607 (zip)

PREMISES: NORMA JEAN'S (name of business) | 442-5030 or 3878263 (phone)

302 N. Goodman St (address # street) | Rochester (city) | NY (state) | 14607 (zip)

SUBSCRIBED AND SWORN TO BEFORE ME THIS 22nd DAY OF May, 19 95

Catherine A Brown
Comm Deeds/Notary Public

CATHERINE A BROWN
Notary Public in the State of New York
Qualified in Monroe County No. 01BR4891848
My Commission Expires August 31, 1995

Benjamin T. Goodman
signature of applicant | 5/22/95 date

---------- office use only ----------

PLEASE FORWARD APPROVED FORMS TO TREASURER'S OFFICE

CZC NO. 020825

APPROVED: Lorena Taber (Zoning) | 5/22/95 date

APPROVED: _____ (Fire Safety Inspector) | _____ date

APPROVED: _____ (Fire Marshall) | _____ date

DISTRIBUTION:
wht - police
pnk - fire
blu - bldng
yel - treas

☐ RENEWAL (prev # ____) $50.00

CITY OF ROCHESTER
BUREAU OF TREASURY
100A CITY HALL
ROCHESTER, NY 14614

LIC# _____
ISS _____
EXP _____

LICENSE APPLICATION

(Indicate license type with an "X")

☒ AMUSEMENT CENTER ☐ ENTERTAINMENT CENTER sq ft ____ seating ____ ☐ DANCE

APPLICANT: Benjamin T. Goodman (full name) | 546-5513 (phone) | DATE OF BIRTH: 10 | 12 | 71

91 Richmond ST (residence # street) | Rochester (city) | N.Y. (state) | 14607 (zip)

ACTIVITY: (describe) Restaurant.

NOTE: If the APPLICANT or PROPERTY OWNER is a partnership, give name, D.O.B. & home address of each partner; if a corporation, give name, D.O.B. & home address of all officers and shareholders; if d.b.a., give name, D.O.B. & home address of principals. (use back side if needed)

PROP OWNER: Mitch Stern (full name) | 442-7061 (phone) | DATE OF BIRTH: 7 | 4 | 69

274 N. Goodman St. (residence # street) | Rochester (city) | NY (state) | 14607 (zip)

PREMISES: Norma Jean's (name of business) | 442-5030 or 387-8263 (phone)

~~274~~ 302 N. Goodman St. (address # street) | Rochester (city) | NY (state) | 14607 (zip)

SUBSCRIBED AND SWORN TO BEFORE ME THIS 22nd DAY OF May, 19 95

Catherine A. Brown
Comm Deeds/Notary Public

CATHERINE A. BROWN
Notary Public in the State of New York
Qualified in Monroe County No. 01BR4891848
My Commission Expires August 31, 1995

Benjamin T. Goodman
signature of applicant | 5/22/95 date

---------- office use only ----------

PLEASE FORWARD APPROVED FORMS TO TREASURER'S OFFICE

(Unlimited Games)

CZC NO. 040825

APPROVED: Lorena Taber (Zoning) | 5/30/95 date

APPROVED: _____ (Fire Safety Inspector) | _____ date

APPROVED: _____ (Fire Marshall) | _____ date

DISTRIBUTION:
wht - police
pnk - fire
blu - bldng
yel - treas

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 13265

ADDRESS: GOODMAN ST N 302 | FROM / TO | TAX ACCT #

PROPERTY OWNER | ADDRESS | PHONE 000-0000

CITY | STATE | ZIP

MAILING NAME | ADDRESS | PHONE

CITY | STATE | ZIP

EMERGENCY CONTACT: ED SCHEMINGER | ADDRESS: 217 KINGSBORO RD | PHONE: 235-1497

CITY | STATE | ZIP: 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME: SCREEN SCENE, INC | PHONE

BUSINESS OWNER: ED SCHEMINGER

ADDRESS: SUITE 303

PHONE: 244 6400

BUSINESS EMERGENCY: ED SCHEMINGER

ADDRESS: 217 KINGSBORO RD ROCHESTER NY14619

PHONE: 235 1497

SPECIAL INSTRUCTIONS: 3

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	OK At Time of Insp				

DISPOSITION by FIRE SAFETY:

FILE

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE: Mary Bartello	POSITION / TITLE: Production Assistant			DATE
FIRE SAFETY INSPECTOR: Albert mch				DATE 1-26-96

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 13261

ADDRESS		FROM / TO	TAX ACCT #
GOODMAN	ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ARBOR INC PHONE

BUSINESS OWNER JOHN VANDERWOOD

ADDRESS E303 ROCHESTER NY14607

PHONE 271 4900

BUSINESS EMERGENCY DENNIS MINER

ADDRESS

PHONE 223 6899

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.

A/E INSPECTION

COMPLAINT

DISPOSITION by FIRE SAFETY:

REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

NO Longer in Business

Delite From File

FILE

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE 1-10-96

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 13266

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

BUSINESS NAME SMACK DABZ PHONE

BUSINESS OWNER CRAIG MORREALE

ADDRESS 302 N GOODMAN ST ROCHESTER NY14607

PHONE 242 0550

BUSINESS EMERGENCY JEFF JOHNSON

ADDRESS 29 STRATHALLN PK #2 ROCHESTER NY14607

PHONE 244 5808

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A/E INSPECTION
COMPLAINT

DISPOSITION by FIRE SAFETY:

REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.

NO longer in Business

Delite From File

FILE

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: albert mch				DATE 1-10-96

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 13263

ADDRESS: GOODMAN ST N
FROM / TO: 302
TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN
ADDRESS: 274 N GOODMAN ST
PHONE: 442-9061
CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: STERN REALTY
ADDRESS: 274 N GOODMAN ST
PHONE:
CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: GARY I STERN
ADDRESS: 40 EVANDALE RD
PHONE: 461-9867
CITY: ROCHESTER STATE: NY ZIP: 14618

NFPA 901 CODES | GENERAL PROPERTY USE: 51 | SPECIFIC PROPERTY USE: 594 | STRUCTURE TYPE: 2 | STRUCTURE STATUS: 2

NO ENTRY DATES:

BUSINESS NAME: KONOFF LOUIS P E R A ARCH PHONE:
BUSINESS OWNER:
ADDRESS: E212 ROCHESTER NY14607
PHONE: 244 0050
BUSINESS EMERGENCY:
ADDRESS:
PHONE:

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A/E INSPECTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO Longer in				
	Business				
	Delite From				
	File				
	FILE				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert Mels				DATE 1-10-96

COPY TO FIRE SAFETY

RFD 501 REV. 12/90

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N Goodman Animatus Studio

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
3-8-95								NO Longer In Business	X	A Mc/s

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY: A01

INSPECTION #: 08248

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	3

NO ENTRY DATES:

BUSINESS NAME: ANIMATUS STUDIO PHONE:
BUSINESS OWNER: FRED ARMSTRONG
ADDRESS: E402 ROCHESTER NY14607
PHONE: 244 6550
BUSINESS EMERGENCY: FRED ARMSTRONG
ADDRESS: 8 FAIRVIEW HT ROCHESTER NY14613
PHONE: 458 2274

SPECIAL INSTRUCTIONS: A/E INSPECTION

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N Goodman Smack DABZ

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
3-8-95								NO Longer IN Business	X	A Melo

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08254

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

BUSINESS NAME SMACK DABZ PHONE

BUSINESS OWNER CRAIG MORREALE

ADDRESS 302 N GOODMAN ST ROCHESTER NY 14607

PHONE 242 0550

BUSINESS EMERGENCY JEFF JOHNSON

ADDRESS 29 STRATHALLN PK #2 ROCHESTER NY 14607

PHONE 244 5808

SPECIAL INSTRUCTIONS: A/E INSPECTION

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N Coodman PEAR Arch

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	A/E INSPECTION	OTHER	OK TO FILE	INSPECTOR
3-1-95									NO Longer IN Business A/E INSPECTION FILE	X	Amels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08251

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME KONOFF LOUIS P E R A ARCH PHONE

BUSINESS OWNER

ADDRESS E212 ROCHESTER NY14607

PHONE 244 0050

BUSINESS EMERGENCY

ADDRESS

PHONE

A/E INSPECTION

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N Goodman St christophers

DATE RECEIVED IN FIRE SAFETY: / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	A/E INSPECTION FILE	OK TO FILE	INSPECTOR
3-1-95								NO Longer In Business	X	A Mels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08255

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE	ZIP 14607

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE	ZIP 14607

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE	ZIP 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

BUSINESS NAME ST CHRISTOPHER'S PHONE

BUSINESS OWNER CHRISTOPHER C WIGHTMAN

ADDRESS E101 ROCHESTER NY14607

PHONE 244 3060

BUSINESS EMERGENCY CHRISTOPHER C WIGHTMAN

ADDRESS 33 WINTERSET DR ROCHESTER NY14625

PHONE 385 4221

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

AVE INSPECTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N. Goodman Creative Designs

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
3-1-95								A/E INSPECTION FILE NO Longer In Business	X	A Mels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 08250

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME CREATIVE DESIGNS OF ROCHE PHONE

BUSINESS OWNER VERA FLIGHT

ADDRESS 210 ROCHESTER NY 14607

PHONE 442 0780

BUSINESS EMERGENCY VERA FLIGHT

ADDRESS 71 EAGLE ROCK DR ROCHESTER NY 14609

PHONE 288 4777

SPECIAL INSTRUCTIONS: A/E INSPECTION

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N Goodman ARbor Inc

DATE RECEIVED IN FIRE SAFETY: / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
3-1-95								A/E INSPECTION FILE	X	A Mels
								NO Longer In Business		

A/E INSPECTION FILE

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

INSPECTION # 08249

COMPANY A01

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME: ARBOR INC | PHONE:
BUSINESS OWNER: JOHN VANDERWOOD
ADDRESS: E303 ROCHESTER NY14607
PHONE: 271 4900
BUSINESS EMERGENCY: DENNIS MINER
ADDRESS:
PHONE: 223 6899

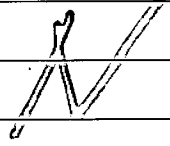
A/E INSPECTION

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
					

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 N. GOODMAN ST

DATE RECEIVED IN FIRE SAFETY:	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
7/18 DATE								A/E INSPECTION		
7/20/94						X		1 con	X	MC

☐ RENEWAL
(prev # ____)

CITY OF ROCHESTER
BUREAU OF TREASURY
100A CITY HALL
ROCHESTER, NY 14614

LIC# _____
ISS _____
EXP _____

LICENSE APPLICATION

(Indicate license type with an "X")

☒ AMUSEMENT CENTER ☐ ENTERTAINMENT CENTER sq ft _____ seating _____ ☐ DANCE

APPLICANT: Christopher Whitman | 244-3060 | DATE OF BIRTH: 2 | 7 | 63
full name | phone

34 Winterset Dr. | Penfield | N.Y. | _____
residence # street | city | state | zip

ACTIVITY: (describe) Amusement Games - 1- Game.

NOTE: If the APPLICANT or PROPERTY OWNER is a partnership, give name, D.O.B. & home address of each partner; if a corporation, give name, D.O.B. & home address of all officers and shareholders; if d.b.a., give name, D.O.B. & home address of principals. (use back side if needed)

PROP OWNER: Gary Stein | 442-9061 | DATE OF BIRTH: ___ | ___ | ___
full name | phone

302 N. Goodman St | Rochester | N.Y. | 14607
residence # street | city | state | zip

PREMISES: St. Christophers | 244-3060
name of business | phone

302 N. Goodman St | Rochester | N.Y. | 14607
address # street | city | state | zip

SUBSCRIBED AND SWORN TO BEFORE ME THIS 5 DAY OF July, 19 94

Daniel C Brolick
Comm Deeds/~~Notary Public~~ 5-31-94

pChris Whitman | 7-5-94
signature of applicant | date

---

office use only

PLEASE FORWARD APPROVED FORMS TO TREASURER'S OFFICE

LIMITED
3 Machines
No. Of Games

CZC NO. 033750

APPROVED: _____ | 7/5/94
Zoning | date

CZC #:

APPROVED: _____ | 7/20/94
Fire Safety Inspector | date

APPROVED: _____ | _____
Fire Marshall | date

DISTRIBUTION:
wht - police
pnk - fire
blu - bldng
yel - treas

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ✓
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 N. Goodman ST. (TELECommunications BANK

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6-13-94								A/E INSPECTION No violations at Time of Insp	X	A Mels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 00116

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME TELECOMMUNICATIONS BANK T PHONE

BUSINESS OWNER PERRY BANKS

ADDRESS E207 ROCHESTER NY14607

PHONE 442 2040

BUSINESS EMERGENCY **A/E INSPECTION**

ADDRESS

PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT THIS TIME				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
John M. Parente	F.S.D			6/3/94
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert Mele				DATE 6-13-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 N. Goodman st (ANIMATUS STUDIO)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6-13-94								A/E INSPECTION No Longer in Business	X	Amels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 00108

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME ANIMATUS STUDIO PHONE

BUSINESS OWNER FRED ARMSTRONG

ADDRESS E402 ROCHESTER NY14607

PHONE 244 6550

BUSINESS EMERGENCY FRED ARMSTRONG

ADDRESS 8 FAIRVIEW HT ROCHESTER NY14613

PHONE 458 2274

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A/E INSPECTION
COMPLAINT

DISPOSITION by FIRE SAFETY:

REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	
	Out of buisness (Renovating) into Apartments 4TH FLOOR

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert Mich				DATE 6-13-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☑
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 Goodman St N. (ST. CHRISTOPHERS)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
								A/E INSPECTION		
6-7-94			X					4 vio - 4 ord		A Mels
6-30-94					X			No Work Done		A Mels
7-26-94						X		4 vio 4 corr	X	A Mels
								FILE		

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 00115

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

BUSINESS NAME ST CHRISTOPHER'S PHONE

BUSINESS OWNER CHRISTOPHER C WIGHTMAN

ADDRESS E101 ROCHESTER NY14607

PHONE 244 3060

A/E INSPECTION

BUSINESS EMERGENCY CHRISTOPHER C WIGHTMAN

ADDRESS 33 WINTERSET DR ROCHESTER NY14625

PHONE 385 4221

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
1st Floor	Junction box need a cover on ceiling dinning area (Front near goodman ST)				
Front ent	EXIT sign out				
Rear storage	Combustible stored to close to the furnace must be removed				
Rear storage	Front cover on furnace is missing				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
John M. Parente	F.S.D.			6/2/94
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
X				
FIRE SAFETY INSPECTOR: Albert mh				DATE 6-7-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

City of Rochester

FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716) 428-7037

Gary I Stern
274 N. Goodman Street
Rochester, New York 14607

June 9, 1994

PLEASE TAKE NOTICE that an inspection on June 7, 1994, at 302 N. Goodman Street, Rochester, New New, reveal violation(s) of the Fire Prevention Code of the City of Rochester and/or the Codes, Rules and Regulations of the State of New York.

Orders are hereby issued for the violation(s) to be corrected on or before the reinspection schedule for June 30, 1994. Failure to comply with these orders will result in the issuance of a Municipal Code Violation Summons for each uncorrected violation with the following penalties:

	INITIAL	FAILURE TO RESPOND
1ST OFFENSE	$ 75.00	$150.00
2ND OFFENSE	150.00	300.00
3RD OFFENSE	375.00	750.00

During this period, the property owner continues to be responsible and liable for any damages arising from the violation(s).

Relevant section(s) of the New York State Uniform Fire Prevention and Building Code (Title 9NYCRR), to wit:

ST CHRISTOPHER'S

1163.11(g) All exposed wiring shall be enclosed or protected according to applicable generally accepted standards.
JUNCTION BOX ON CEILING IN DINING AREA FRONT NEAR GOODMAN STREET SHALL HAVE A COVER.

1163.8(e)(2) If the heat source is not within an enclosure, then combustible materials shall not be stored within 36 inches of such device.
COMBUSTIBLES STORED BY FURNACE SHALL BE REMOVED.

1163.8(a) GENERAL REQUIREMENTS. Heating equipment for buildings and structures shall be maintained so as to be safe to persons and property and in accordance with generally accepted standards.
FRONT COVER SHALL BE PUT BACK ON FURNACE.

City of Rochester
FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716) 428-7037

1162.3(b) Exit signs shall be maintained in a clean and legible condition, unobstructed by decorations, furnishings or equipment and illuminated at all times. <CI-222>
EXIT SIGN ON FRONT ENTRANCE SHALL BE MADE OPERABLE.

BY ORDER OF THE FIRE MARSHAL INSPECTOR Albert Mels
ALBERT MELS 6547

DATE OF COMPLIANCE 7/26/94 INSPECTOR Albert Mels

City of Rochester

FIRE SAFETY DIVISION

FOR INTERNAL USE ONLY

DATE: _____ Page 1 of 1

BUSINESS NAME: _____ OWNER: Gary I Stern

MAILING ADDRESS: _____ Zip _____ ADDRESS: 274 N Goodman Zip 14607

ADDRESS OF VIOLATIONS: 302 N Goodman CITY: Rochester

ATTENTION: Gary I Stern REINSPECTION DATE: 6-30-94

CODE VIOLATION #	DESPCRIPTION AND/OR LOCATION OF VIOLATION
	ST Christopher's
1163.11 g	Junction Box on ceiling in
	dinning Area Front Near
	Goodman st shall have a cover
1162.3 b	Exit Sigth on Front Entrence
	shall be made operable
1163.8e-2	Combustiables stored by Furnace
	shall be Removed
1163.8 a	Front cover shall be Put
	back on Furnace

INSPECTOR: Albert Mele IBM# 6547

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ✓
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 North Goodman ST (Creative Designs of Rochester)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6-7-94								No violations at Time of Insp	X	Amels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 00110

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME CREATIVE DESIGNS OF ROCHE PHONE

BUSINESS OWNER VERA FLIGHT

ADDRESS 210 ROCHESTER NY14607

PHONE 442 0780

A/E INSPECTION

BUSINESS EMERGENCY VERA FLIGHT

ADDRESS 71 EAGLE ROCK DR ROCHESTER NY14609

PHONE 288 4777

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT THIS TIME				

OFFICER PREPARING REPORT	COMPANY	DISTRICT	GROUP	DATE
John M. Parente	F.S.D			6/3/94
BUS/PROP REPRESENTATIVE: Robert Flight	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert mrb				DATE 6-7-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ✓
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 N. Goodman St. (SMACK DABZ)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6-7-94								No longer in Business	X	A Mels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 00114

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

BUSINESS NAME SMACK DABZ PHONE

BUSINESS OWNER CRAIG MORREALE

ADDRESS 302 N GOODMAN ST ROCHESTER NY14607

PHONE 242 0550

BUSINESS EMERGENCY JEFF JOHNSON

ADDRESS 29 STRATHALLN PK #2 ROCHESTER NY14607

PHONE 244 5808

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	A/E INSPECTION				
	Out of Business (VACANT)				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE 6/3/94
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert Mir				DATE 6-7-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 NORTH Goodman ST. (ARBOR INC.)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6-7-94								No Longer in Business	X	A Meeks

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

INSPECTION # 00109

COMPANY: A01

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: ARBOR INC | PHONE:
BUSINESS OWNER: JOHN VANDERWOOD
ADDRESS: E303 ROCHESTER NY 14607
PHONE: 271 4900
BUSINESS EMERGENCY: DENNIS MINER
ADDRESS:
PHONE: 223 6899

A/E INSPECTION

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	"out of baisness"				

OFFICER PREPARING REPORT: John Parente | COMPANY: F.S.D. | DISTRICT | GROUP | DATE: 6/3/94

BUS/PROP REPRESENTATIVE: | POSITION / TITLE | DATE

FIRE SAFETY INSPECTOR: Albert Mc | DATE: 6-7-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☑
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 Goodman St N. (Screen Scene Inc.)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6-6-94								No violations at Time of Insp	X	Ames

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 00113

ADDRESS GOODMAN ST N FROM / TO 302 TAX ACCT #

PROPERTY OWNER ADDRESS PHONE 000-0000

CITY STATE ZIP

MAILING NAME ADDRESS PHONE

CITY STATE ZIP

EMERGENCY CONTACT ED SCHEMINGER ADDRESS 217 KINGSBORO RD PHONE 235-1497

CITY STATE ZIP 14619

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS

NO ENTRY DATES:

BUSINESS NAME SCREEN SCENE, INC PHONE 244-6400

BUSINESS OWNER SCHEMINGER

ADDRESS SUITE 303 A/E INSPECTION

BUSINESS EMERGENCY ED SCHEMINGER PHONE

ADDRESS 217 KINGSBORO RD ROCHESTER NY14619

PHONE 235 1497

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT THIS TIME				

OFFICER PREPARING REPORT: John M. Parente — COMPANY FSD — DISTRICT — GROUP — DATE 6/3/94

BUS/PROP REPRESENTATIVE: X Mary Bartello — POSITION / TITLE — DATE

FIRE SAFETY INSPECTOR: Albert mlc — DATE 6-6-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ✓
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 Goodman St N. (Schwarz Ralph + Son INC)

DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
DATE RECEIVED IN FIRE SAFETY:										
6-6-94								NO violations at Time of Insp	X	A Mels

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 00112

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME SCHWARZ RALPH C & SONS IN PHONE

BUSINESS OWNER JAMES SCHWARZ

ADDRESS E309 ROCHESTER NY14607

PHONE 271 4696

A/E INSPECTION

BUSINESS EMERGENCY JAMES SCHWARZ

ADDRESS 165 GLEN ELLYN WY ROCHESTER NY14618

PHONE 473 6521

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT THIS TIME				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
X John M. Parente	FSD			6/3/94
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert Mule				6-6-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ✓
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 307 North Goodman ST (KONOFF Louis PERA ARCH)

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
6/3/94			✓					FILE	X	A Nels
10-10-94								NO violations at Time of Insp		

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 00111

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: KONOFF LOUIS F E R A ARCH PHONE:

BUSINESS OWNER

ADDRESS: E212 ROCHESTER NY 14607

PHONE: 244 0050

BUSINESS EMERGENCY: A/E INSPECTION

ADDRESS

PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Violations at Time of Insp				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: Albert Mch				DATE 10-10-94

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 N Goodman Screen Scene Ins.

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
2-10-94							X	7 vio 7 corr	X	AMcLs

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION 302 N. Goodman Street — Screen Scene, Inc.

DATE RECEIVED IN FIRE SAFETY: 10/28/93 DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
12-14-93			X					7 vio 7 ord		AMcL
1-7-94										

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01 | INSPECTION #: 03214

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ~~ARBOR INC~~ SCREEN SCENE, INC PHONE

BUSINESS OWNER ~~JOHN VANDERWOOD~~

ADDRESS E303 ROCHESTER NY 14607

PHONE ~~271-4900~~ 244-6400

BUSINESS EMERGENCY ~~DENNIS MINER~~ Ed Scheminger

ADDRESS 217 Kingsboro Rd Roch NY 14619

PHONE ~~223-6899~~ ~~244-6~~ 235-1497

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
W OFFICE	EXIT SIGNS(2) IMPROPERLY PLACED				✓
MAIN OFFICE	EXIT SIGN IMPROPERLY PLACED				
UTILITY RM	combustibles stored to close to FURNACE				
"	COVER MISSING ON FURNACE				
"	Foam RUBBER PIPE INSULATION IN CONTACT with FLUE PIPE				
MAIN OFFICE	IMPROPER USE of EXTENTION CORD (FOR lighting)			✓	
MAIN OFFICE	IMPROPER USE of EXTENTION CORD (FOR light tables)			✓	
	REINSPECTED 9-13-93 FF M. Bourque				

OFFICER PREPARING REPORT	COMPANY	DISTRICT	GROUP	DATE
F.F. Sam Marano	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
X	PRESIDENT			5-17-93
FIRE SAFETY INSPECTOR:	Albert Mele			DATE 12-14-93

COPY TO FIRE SAFETY

RFD 501 REV. 12/90

City of Rochester
FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716)428-7037

Gary I Stern
274 N. Goodman Street
Rochester, New York 14607

December 17, 1993

PLEASE TAKE NOTICE that an inspection on December 15, 1993 at 302 N. Goodman Street, Rochester New York, reveal violation(s) of the Fire Prevention Code of the City of Rochester and/or the Codes, Rules and Regulations of the State of New York.

Orders are hereby issued for the violation(s) to be corrected on or before the reinspection schedule for January 10, 1993. Failure to comply with these orders will result in the issuance of a Municipal Code Violation Summons for each uncorrected violation with the following penalties:

	INITIAL	FAILURE TO RESPOND
1ST OFFENSE	$ 75.00	$150.00
2ND OFFENSE	150.00	300.00
3RD OFFENSE	375.00	750.00

During this period, the property owner continues to be responsible and liable for any damages arising from the violation(s).

Relevant section(s) of the New York State Uniform Fire Prevention and Building Code (Title 9NYCRR) to wit:

1162.3(c) A sign reading "EXIT", and indicating the direction, shall be placed in every location where the direction of travel to reach the nearest exit is not immediately apparent.
1- (2) TWO EXIT SIGNS IN WEST OFFICE IMPROPERLY PLACED AND SHALL BE CORRECTED.
2-EXIT SIGN IN MAIN OFFICE IMPROPERLY PLACED AND SHALL BE CORRECTED.

1163.8(a) GENERAL REQUIREMENTS. Heating equipment for buildings and structures shall be maintained so as to be safe to persons and property and in accordance with generally accepted standards.
COVER SHALL BE PUT BACK ON FURNACE.

1163.8(b) PROHIBITED USES. Use of any stove, oven, furnace, incinerator, boiler or any other heat-producing device or appliance found to be defective or which creates an immediate fire hazard or imperils occupants or is not designed for the purpose of heating shall be prohibited.
FOAM RUBBER PIPE INSULATION SHALL BE SEPARATED FROM FLUE PIPE.

City of Rochester
FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716)428-7037

1163.8(e)(2) If the heat source is not within an enclosure, then combustible materials shall not be stored within 36 inches of such device.
COMBUSTIBLES STORED NEAR FURNACE SHALL BE REMOVED.

BY ORDER OF THE FIRE MARSHAL INSPECTOR Albert Mels
ALBERT MELS 6547

DATE OF COMPLIANCE 2/10/94 INSPECTOR Albert Mels

City of Rochester

FIRE SAFETY DIVISION

FOR INTERNAL USE ONLY

DATE: _____ Page 1 of 1

BUSINESS NAME: _____ OWNER: Gary I Stern

MAILING ADDRESS: _____ Zip _____ ADDRESS: 274 N Goodman Zip _____

ADDRESS OF VIOLATIONS: 302 N Goodman CITY: Rochester 14607

ATTENTION: Gary I Stern REINSPECTION DATE: 1-10-94

CODE VIOLATION #	DESPCRIPTION AND/OR LOCATION OF VIOLATION
1162.3c	2 Exit Signs in west office
	improperly Placed and shall be corrected.
1162.3c	Exit Sign in main office improperly
	Placed. and shall be corrected
1163.8e-2	Combustiables stored Near Furnace
	shall be removed
1163.8a	cover shall be Put back on Furnace
1163.8b	Foam Rubber Pipe Insulation shall
	be seperated from Flue Pipe

INSPECTOR: Albert Mch IBM# 6547

FIRE SAFETY INSPECTION RECORD

A/E LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION 302 GOODMAN STREET N. ST. CHRISTOPHER'S

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
9-2-93			↘							
9-7-93										

Fire Dept.
Fire Safety Division
Public Safety Bldg.
Rochester, N.Y. 14614

OFFICE OF THE
FIRE MARSHAL
TELEPHONE: 428-7037

NOTICE OF VIOLATIONS

DATE 9-2-95

St. Christopher's
Name

302 N. Goodman St.
Address

Inspection of premises located at _____ reveals violations of the Fire Prevention Code. Orders are hereby issued for correction of hazards listed herewith on or before: _____.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 75	$150
2nd OFFENSE	$150	$300
3rd & SUBSEQUENT	$375	$750

1) Repair exit lite to work

By Order of
FIRE MARSHAL

INSPECTOR [signature]

DATE of COMPLIANCE _____ Inspector _____

FD506

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

BUILDING INSPECTION / COMPLAINT FORM

INCIDENT # | | | | | | |

INSPECTION # 8

ADDRESS 302 N Goodman St

PROPERTY OWNER GARY I. STERN	ADDRESS 274 N. GOODMAN ST. ROCH., NY, 14609	PHONE 442-9061
EMERGENCY CONTACT SAME	ADDRESS 40 EVANDALE RD. ROCH. 14618	PHONE 461-9867
COMPLAINANT	ADDRESS	PHONE

NFPA 901 CODES | GENERAL PROPERTY USE | SPECIFIC PROPERTY USE | STRUCTURE TYPE | STRUCTURE STATUS

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS:
NAME CREATIVE DESIGNS OF ROCHESTER, INC PHONE
OWNER VERA FLIGHT 71 EAGLE ROCK DR. ROCH. 14609
ADDRESS ~~302 N. GOODMAN ST., SUITE 210~~ PHONE
EMERGENCY CONTACT OWNER PHONE 288 4777

DISPOSITION by FIRE SAFETY:
NOT REQUIRED
CORRECTED
ORDERS ISSUED
REFERRED

DIRECTION, ROOM #, ETC.	NATURE of VIOLATION or COMPLAINT
	NO COMPLAINTS AT THIS TIME

OFFICER PREPARING REPORT: F.F. MICHAEL BOURQUE	COMPANY A-1	GROUP 2	DATE 6-11-93
BUS/PROP REPRESENTATIVE: X Vera M. Flight	POSITION/TITLE		DATE
FIRE SAFETY INSPECTOR:			DATE

FD501

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION 00302 GOODMAN ST N SMACK DABZ

DATE RECEIVED IN FIRE SAFETY: 04/30/93	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
DATE										
6-3-93									X	

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 03223

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

BUSINESS NAME SMACK DABZ PHONE 242-0550
BUSINESS OWNER CRAIG MORREALE
ADDRESS 302 N GOODMAN ST ROCHESTER NY 14607
PHONE
BUSINESS EMERGENCY JEFF JOHNSON
ADDRESS
29 STRATHALLAN PK #7 PHONE 244-5808
SPECIAL INSTRUCTIONS: A/E INSPECTION
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
1	KITCHEN	INSTALL EXIT SIGN @ DOOR LEADING OUTSIDE				X
2	UTILITY RM	SECURE ELECTRICAL CABLE TO WALL				X
3	UTILITY RM	WATER HEATER VENT PIPE - REMOVE INSULATION BOARD TOUCHING PIPE, SECURE VENT PIPE				X
4	KITCHEN	UNDER RENOVATION - CHECK ON PERMIT				X
		NOTE: THESE VIOLATIONS ARE FROM LT McDERMOTT'S INSPECTION of 4/5/93. FOR A CLUB CALLED "NIGHT MOVES". NIGHT MOVES IS NOW CALLED SMACK DABZ.				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT C. Stadler	A-1		3	4/14/93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE 6-3-93

COPY TO FIRE SAFETY

RFD 501 REV. 12/90

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # -03184

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	274	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST CITY ROCHESTER STATE NY ZIP 14607	442-9061

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD CITY ROCHESTER STATE NY ZIP 14618	461-9867

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	162	2	2

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME ~~NIGHT MOVES~~ SMAK DABZ PHONE
BUSINESS OWNER ~~TOD FRIGA~~ JEFF JOHNSON
ADDRESS 274 N GOODMAN ST ROCHESTER NY 14607
PHONE ~~271-8334~~ 242-0550
BUSINESS EMERGENCY ~~DAVE CULTRARA~~ JEFF JOHNSON
ADDRESS ~~467 PARK AV~~ ROCHESTER NY 14607
29 STRATHALLEN PK. #2 PHONE ~~271-2961~~ 244-5803

SPECIAL INSTRUCTIONS: **A/E INSPECTION**

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
1	KITCHEN	INSTALL EXIT SIGN AT DOOR LEADING OUTSIDE.				✓
2.	UTILITY ROOM	- SECURE ELECTRICAL CABLE TO WALL				✓
3.	UTILITY ROOM	WATER HEATER VENT PIPE - REMOVE INSULATION BOARD TOUCHING PIPE, SECURE VENT PIPE				✓
4	KITCHEN	- UNDER RENOVATIONS - CHECK on PERMIT				

OFFICER PREPARING REPORT	COMPANY	DISTRICT	GROUP	DATE
LT. J. McDermott	A-1		4	04-05-93
BUS/PROP REPRESENTATIVE	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR				DATE
				6-3-93

RFD 301 REV. 12/90

COPY TO FIRE SAFETY

out of business VACANT

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 03216

ADDRESS		FROM / TO		TAX ACCT #
GOODMAN	ST N	302		005000-03.0

PROPERTY OWNER		ADDRESS		PHONE
GARY	I STERN	274 N GOODMAN ST		442-9061
		CITY ROCHESTER	STATE NY	ZIP 14607

MAILING NAME		ADDRESS		PHONE
STERN REALTY		274 N GOODMAN ST		
		CITY ROCHESTER	STATE NY	ZIP 14607

EMERGENCY CONTACT		ADDRESS		PHONE
GARY I STERN		40 EVANDALE RD		461-9867
		CITY ROCHESTER	STATE NY	ZIP 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME GRAPHIC CAREERS PHONE

BUSINESS OWNER JOHN VANDERWOOD

ADDRESS SUITE 401 ROCHESTER NY 14607 PHONE 271 4900

BUSINESS EMERGENCY JOHN VANDERWOOD

ADDRESS 187 FRONTENAC HT ROCHESTER NY 14617 PHONE 338 2908

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	BUSINESS MOVED				
	SUITE 401 VACANT				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F. Jim McInnis III	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 03217

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME KONOFF LOUIS P E R A ARCH PHONE
BUSINESS OWNER
ADDRESS E212 ROCHESTER NY 14607
PHONE 244 0050
BUSINESS EMERGENCY
ADDRESS
PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No COMPLAINTS AT THIS TIME				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F. M. E. Bowen	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE 5-17-93
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

FFD 501 REV. 12/90

VACANT

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 03218

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME LEARNING CONNECTION THE PHONE

BUSINESS OWNER JOHN MC INTYRE

ADDRESS E307 ROCHESTER NY 14607

PHONE 244 4990

BUSINESS EMERGENCY JOHN MC INTYRE

ADDRESS 344 HARTSVILLE LN WEBSTER NH

PHONE 265 3433

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	BUSINESS MOVED				
	SUITE VACANT				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F Sam Motaano III	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 03219

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME ~~MAYBECK BUCHER VOLLAND CO~~ ANIMATUS STUDIO PHONE

BUSINESS OWNER ~~EDWARD E MAYBECK~~ Fred Armstrong

ADDRESS E402 ROCHESTER NY14607

PHONE ~~473 7339~~ 244 6550

BUSINESS EMERGENCY ~~EDWARD E MAYBECK~~ Roch

ADDRESS ~~56 RAND PL~~ 8 Fairview Heights ~~PITTSFORD~~ ~~NY14534~~ NY 14613

PHONE ~~385 2225~~ 458-2274

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Violation at time of Inspection				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F. [signature]	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE: [signature] OWNER	POSITION / TITLE			DATE 5-17-93
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # -03220

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES | GENERAL PROPERTY USE 51 | SPECIFIC PROPERTY USE 591 | STRUCTURE TYPE 2 | STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME ROCHESTER PROFESSIONAL BU PHONE
BUSINESS OWNER
ADDRESS E202 ROCHESTER NY 14607
PHONE 442 3360
BUSINESS EMERGENCY
ADDRESS PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	OUT OF BUSINESS				
	BUSINESS NO LONGER EXISTS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F. M.A. Bourque	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 03221

ADDRESS: GOODMAN ST N
FROM / TO: 302
TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN
ADDRESS: 274 N GOODMAN ST
PHONE: 442-9061
CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: STERN REALTY
ADDRESS: 274 N GOODMAN ST
PHONE:
CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: GARY I STERN
ADDRESS: 40 EVANDALE RD
PHONE: 461-9867
CITY: ROCHESTER STATE: NY ZIP: 14618

NFPA 901 CODES: GENERAL PROPERTY USE 51 SPECIFIC PROPERTY USE 591 STRUCTURE TYPE 2 STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME: ROCHESTER REGIONAL LIBRAR PHONE:
BUSINESS OWNER: JANET WELCH
ADDRESS: E203 ROCHESTER NY14607
PHONE: 461 5440
BUSINESS EMERGENCY: JANET WELCH
ADDRESS:
PHONE: 425 1524

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT THIS TIME				
	BUSINESS IN THE PROCESS OF MOVING TO FAIRPORT;				
	WILL NO LONGER BE AT THIS LOCATION AS OF				
	5-26-93				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F. M.A. Rouque	A-1		Z	5-17-93
BUS/PROP REPRESENTATIVE: Loreen Guttadamia	POSITION / TITLE			DATE 5-17-93
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 — INSPECTION # 03222

ADDRESS: GOODMAN ST N — FROM / TO: 302 — TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN — ADDRESS: 274 N GOODMAN ST — PHONE: 442-9061
CITY: ROCHESTER — STATE: NY — ZIP: 14607

MAILING NAME: STERN REALTY — ADDRESS: 274 N GOODMAN ST — PHONE:
CITY: ROCHESTER — STATE: NY — ZIP: 14607

EMERGENCY CONTACT: GARY I STERN — ADDRESS: 40 EVANDALE RD — PHONE: 461-9867
CITY: ROCHESTER — STATE: NY — ZIP: 14618

NFPA 901 CODES — GENERAL PROPERTY USE: 51 — SPECIFIC PROPERTY USE: — STRUCTURE TYPE: 2 — STRUCTURE STATUS: 2

NO ENTRY DATES:

BUSINESS NAME: SCHWARZ RALPH C & SONS IN — PHONE:
BUSINESS OWNER: JAMES SCHWARZ
ADDRESS: E309 ROCHESTER NY14607
PHONE: 271 4696
BUSINESS EMERGENCY: JAMES SCHWARZ
ADDRESS: 165 GLEN ELLYN WY ROCHESTER NY14618
PHONE: 473 6521

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Violations at time of Inspection				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
FF [signature] Mitrano III	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE: [signature], Pres.	POSITION / TITLE			DATE 5-17-93
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 03224

ADDRESS	FROM / TO		TAX ACCT #
GOODMAN ST N	302		005000-03.0

PROPERTY OWNER	ADDRESS		PHONE
GARY I STERN	274 N GOODMAN ST		442-9061
	CITY ROCHESTER	STATE NY	ZIP 14607
MAILING NAME	ADDRESS		PHONE
STERN REALTY	274 N GOODMAN ST		
	CITY ROCHESTER	STATE NY	ZIP 14607
EMERGENCY CONTACT	ADDRESS		PHONE
GARY I STERN	40 EVANDALE RD		461-9867
	CITY ROCHESTER	STATE NY	ZIP 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME TELECOMMUNICATIONS BANK I PHONE
BUSINESS OWNER
ADDRESS E207 ROCHESTER NY 14607
PHONE 442 2040
BUSINESS EMERGENCY
ADDRESS PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Complaints AT THIS TIME				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
F.F. W. H. Bourque	A-1		2	5-17-93
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE 5-17-93
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Vacant

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01 | INSPECTION # 03215

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES | GENERAL PROPERTY USE 51 | SPECIFIC PROPERTY USE 591 | STRUCTURE TYPE 2 | STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME COMPUTER LEARNING CONNECT PHONE
BUSINESS OWNER CINDY MC GLYNN
ADDRESS ROCHESTER NY 14607
PHONE 244 4990
BUSINESS EMERGENCY CINDY MC GLYNN
ADDRESS 165 N WATER ST ROCHESTER NY 14604
PHONE 325 6545

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	Business moved				
	Suite vacant				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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FD570

300083 FIRE SAFETY INSPECTION RECORD

E/D LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION 302 N GOODMAN ST ST CHRISTOPHER's

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
3-16-93								4 vio corrected same day	X	A Mels

FD570

FIRE SAFETY INSPECTION RECORD

☒ LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 302 N.G DMAN St

ENT ~~[illegible]~~ ~~[illegible]~~'s Smack Dabz

DATE RECEIVED IN FIRE SAFETY: / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
11/6/92							X	Old ~~[illegible]~~ occupancy signi #@(150.) ~~3 con's~~ ~~[illegible]~~ ~~[illegible]~~ ~~[illegible]~~ ~~[illegible]~~ under complete renovation, will call fire inspector to set up appt. for inspection		AR
11/9/92	1 pm							6 vid 6 ord. 1 con.		AR
11/10/92	1 pm							7 con	X	AR

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

INCIDENT # | INSPECTION # 8

ADDRESS

PROPERTY OWNER	ADDRESS	PHONE
EMERGENCY CONTACT	ADDRESS	PHONE
COMPLAINANT	ADDRESS	PHONE

NFPA 901 CODES | GENERAL PROPERTY USE | SPECIFIC PROPERTY USE | STRUCTURE TYPE | STRUCTURE STATUS

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS: NAME Smack Dabz PHONE
OWNER Craig Merrdale
ADDRESS PHONE
EMERGENCY CONTACT PHONE

DISPOSITION by FIRE SAFETY:
NOT REQUIRED
CORRECTED
ORDERS ISSUED
REFERRED

	DIRECTION, ROOM #, ETC.	NATURE of VIOLATION or COMPLAINT	
1A	Kit	Elect wires loose/hanging need fastening from receptacl	X
1A	Kit ceiling	Elect J box open @ kit ceiling - cover missing & loose.	X
1A	Kit	Co2 cylinder not secured.	X
1A	Stage	Extension cord use as perm wiring	X
1A	Kit	Cooling unit cover replace/re-install	X
O	above Front door	Elect insulation worn on wiring for outside lights	X
O	above Front door	Elect J box cove loose.	X
1A	Bar	Occ. sign issued, #150.	X

OFFICER PREPARING REPORT: CEO Albert Richards | COMPANY F/S | GROUP | DATE 11/10/92
BUS/PROP REPRESENTATIVE: | POSITION/TITLE | DATE
FIRE SAFETY INSPECTOR: CEO Albert Richards | DATE 11/10/92

FD501

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ■
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 99302 GOODMAN ST N HILLY'S/SCARPINO'S

DATE RECEIVED IN FIRE SAFETY: 08/24/92

DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
9-3-92			X					5-Vio-5 ord		A mels
9-30-92					X			No work Done		A mels
12-7-92						X		5 Corr	X	A mels
								Bld Now vacant		
								and secured		

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01 | INSPECTION # 00765

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	161	2	2

NO ENTRY DATES:

BUSINESS NAME ~~HILLY'S CAFE & WINE BAR~~ Hilly's / Scarpinos PHONE

BUSINESS OWNER ~~RICHARD MOORE~~

ADDRESS 302 N GOODMAN ST ROCHESTER NY 14607 PHONE ~~271-8820~~ 244-3730

BUSINESS EMERGENCY ~~RICHARD MOORE~~ Gary Stern

ADDRESS ~~10 BUCKINGHAM ST~~ ROCHESTER NY 14607

40 Evandale Rd. PHONE ~~461-4181~~ 461-986

SPECIAL INSTRUCTIONS: Scarpers & Restaurant

SPECIAL HAZARDS OR CONSTRUCTION: 302 N. Goodman St 14607

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
1	Outside Wine Cellar RM	Exposed Electrical Wiring on Ceiling		X	X	
1	Dining Area	Electrical Extension Chord Used For Lighting on Ceiling		X	X	
1	Stock RM Utility RM.	Remove Combustibles AWAY From Boiler + Hot Water Tank.		X	X	
1	Stock RM	Electrical Box Cover Missing X		X	X	
1	WINE CELLAR RM.	Electrical Extension Chord For Ceiling Light- Need to be Hard Wired and permanent light Fixture.		X	X	
		(Reinspection 8/10/92 No CORRECTIONS Capt R. Mendolera)				
1	Kitchen	* Sprinkler Head - Wrong application of style head. Using Upright for Pendant Position 14:00 HRS.				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
T.A.T. M. McCullough	A-1	3	2	5-18-92
BUS/PROP REPRESENTATIVE: Mark Winterson	POSITION / TITLE CHEF			DATE 5/18/92
FIRE SAFETY INSPECTOR: Albert Metz				DATE 9-3-92

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

City of Rochester
FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716) 428-7037

Gary I. Stein
40 Evandale Road
Rochester, New York 14618

September 4, 1992

PLEASE TAKE NOTICE THAT an inspection 302 N. Goodman St. Rochester, New York, reveals violation(s) of the Fire Prevention Code of the City of Rochester and/or the Codes, Rules and Regulations of the State of New York.

Orders are hereby issued for the violation(s) to be corrected on or before the reinspection schedule for September 30, 1992. Failure to comply with these orders will result in the issuance of a Municipal Code Violation Summons for each uncorrected violation with the following penalties:

	INITIAL	FAILURE TO RESPOND
1ST OFFENSE	$ 75.00	$150.00
2ND OFFENSE	150.00	300.00
3RD OFFENSE	375.00	750.00

During this period, the property owner continues to be responsible and liable for any damages arising from the violation(s).

Relevant section(s) of the New York State Uniform Fire Prevention and Building Code (Title 9NYCRR) to wit:

1163.8e-2 If the heat source is not within an enclosure, then combustible materials shall not be stored within 36 inches of such device.
(COMBUSTIBLES SHALL BE REMOVED FROM AROUND BOILER AND HOT WATER TANK.

1163.11e Nonmetallic extension cords shall not be used in place of permanent fixed wiring and the temporary use thereof shall be kept to a minimum.
(EXTENSION CORD BEING USED FOR LIGHTING SHALL BE REMOVED DINNING ROOM.)
(EXTENSION CORD USED FOR LIGHT IN WINE CELLER SHALL BE REMOVED.)

City of Rochester

FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716) 428-7037

1163.11g All exposed wiring shall be enclosed or protected according to applicable generally accepted standards.
(OPEN END WIRES ON CEILING OUTSIDE WINE ROOM SHALL BE PUT IN A BOX WITH A COVER.)
(ELECTRIC BOX IN STOCKROOM SHALL HAVE COVER PUT BACK ON.)

BY ORDER OF THE FIRE MARSHAL INSPECTOR Albert Mels

Albert Mels 6547

DATE OF COMPLIANCE 12/7/79 INSPECTOR Albert Mels

City of Rochester

FIRE SAFETY DIVISION

FOR INTERNAL USE ONLY

DATE _____ PAGE 1 OF 1

BUSINESS NAME _____ OWNER: Gary I Stern

MAILING ADDRESS _____ ZIP _____ ADDRESS: 40 Evan Dale Rd

ADDRESS OF VIOLATIONS: 302 N Goodman CITY: Rochester ZIP 14618

ATTENTION: Gary I Stern REINSPECTION DATE: 9-30-92

	CODE VIOLATION #	DESCRIPTION and/or LOCATION OF VIOLATION
3	✓ 1163.11g	Open End wires on ceiling out side wine Room shall be put in a Box with a cover
2	✓ 1163.11e	Extension cord being used for Lighting shall be removed Dinning Room
N	1163.8e-2	combustibles shall be removed From aroud Boiler and Hot water Tank
3	1163.11g	Electric Box in stock room shall have Cover Put Back on
2	✓ 1163.11e	Extension cord used for light in wine celler shall be removed

FD506-A

INSPECTOR: Albert Mils IBM # 6547

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

BUILDING INSPECTION / COMPLAINT FORM

COMPANY A01

INSPECTION # 00763

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ALLEN-BAILEY TAG & LABEL PHONE

BUSINESS OWNER

ADDRESS E206 ROCHESTER NY 14607

PHONE 442 2690

BUSINESS EMERGENCY

ADDRESS

PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No longer This Address				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J Tillie	A-1		2	6/22/92
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

INSPECTION # 00764

COMPANY A01

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME GRAPHIC CAREERS PHONE
BUSINESS OWNER JOHN VANDERWOOD
ADDRESS SUITE 401 ROCHESTER NY 14607
PHONE 271 4900
BUSINESS EMERGENCY JOHN VANDERWOOD
ADDRESS 187 FRONTENAC HT ROCHESTER NY 14617
PHONE 338 2908

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT JAMES	A-1		2	6/22/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 00766

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME: KONOFF LOUIS F E R A ARCH PHONE:

BUSINESS OWNER

ADDRESS: E212 ROCHESTER NY 14607

PHONE: 244 0050

BUSINESS EMERGENCY:

ADDRESS: PHONE:

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #; ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No COMPLAINTS AT THIS TIME				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
FF Michael Bourque	A-1		2	6-22-92
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE 6-22-92
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 00769

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME MAYBECK BUCHER VOLLAND CO PHONE
BUSINESS OWNER EDWARD E MAYBECK
ADDRESS E402 ROCHESTER NY 14607
PHONE 473 7339
BUSINESS EMERGENCY EDWARD E MAYBECK
ADDRESS 56 RAND PL FITTSFORD NY 14534
PHONE 385 2225

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J TAILLIE	A-1		2	6/22/92
BUS/PROP REPRESENTATIVE: X Brinie Bruce	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 00770

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ROCHESTER PROFESSIONAL BU PHONE

BUSINESS OWNER

ADDRESS E202 ROCHESTER NY 14607

PHONE 442 3360

BUSINESS EMERGENCY

ADDRESS

PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J TAILLIE	A-1		2	6/22/92
BUS/PROP REPRESENTATIVE: Mary F. Michel	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 00773

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME TELECOMMUNICATIONS BANK PHONE

BUSINESS OWNER

ADDRESS E207 ROCHESTER NY14607

PHONE 442 2040

BUSINESS EMERGENCY

ADDRESS

PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J Tallie	A-1		2	6/22/92
BUS/PROP REPRESENTATIVE: Mary T. Michel (receptionist)	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 00772

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES — GENERAL PROPERTY USE: 51 — SPECIFIC PROPERTY USE: — STRUCTURE TYPE: 2 — STRUCTURE STATUS: 2

NO ENTRY DATES:

BUSINESS NAME: SCHWARZ RALPH C & SONS IN — PHONE:
BUSINESS OWNER: ~~RALPH SCHWARZ~~ Jim Schwartz
ADDRESS: E309 ROCHESTER NY14607
PHONE: 271 4696
BUSINESS EMERGENCY: JAMES SCHWARZ
ADDRESS: 165 GLEN ELLYN WY ROCHESTER NY14618
PHONE: 473 6521

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
3	Store RM	Remove Boxes off top Shelf Need 18" clearance for automatic sprinklers.			X	
		(Reinspection 8/10/92 Complaint Corrected Capt R [illegible])				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Lt. M. McCullough	A-1	3	2	5-18-92
BUS/PROP REPRESENTATIVE: [signature]	POSITION / TITLE: Res			DATE: 5/18/92
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

RFD 501 REV. 12/90

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 00767

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY: ROCHESTER STATE: NY ZIP: 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY: ROCHESTER STATE: NY ZIP: 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY: ROCHESTER STATE: NY ZIP: 14618	

NFPA 901 CODES — GENERAL PROPERTY USE: 51 — SPECIFIC PROPERTY USE: 591 — STRUCTURE TYPE: 2 — STRUCTURE STATUS: 2

NO ENTRY DATES:

BUSINESS NAME: LEARNING CONNECTION — PHONE:
BUSINESS OWNER: ~~S SEITZ~~
ADDRESS: E306 ROCHESTER NY14607
PHONE: 244 4990
BUSINESS EMERGENCY: John McIntyre
ADDRESS: 344 Hartsville Lane — PHONE: 265-3433
SPECIAL INSTRUCTIONS: Webster, 14580
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Complaints Found AT This Time 14:45 HRs				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
TLT. M. McCullough	A-1	3	2	5-18-92
BUS/PROP REPRESENTATIVE: [signature]	POSITION / TITLE: Owner			DATE: 5/18/92
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 00768

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY: ROCHESTER STATE: NY ZIP: 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY: ROCHESTER STATE: NY ZIP: 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY: ROCHESTER STATE: NY ZIP: 14618	

NFPA 901 CODES — GENERAL PROPERTY USE: 51 — SPECIFIC PROPERTY USE: 591 — STRUCTURE TYPE: 2 — STRUCTURE STATUS: 2

NO ENTRY DATES:

BUSINESS NAME: LEARNING CONNECTION THE — PHONE:
BUSINESS OWNER: ~~S SEITZ~~
ADDRESS: E307 ROCHESTER NY14607
PHONE: 244 4990
BUSINESS EMERGENCY: John McIntyre
ADDRESS: 344 Hartsville Lane Webster, N.Y. 14580 — PHONE: 265-3433
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No Complaints Found At This Time. 14:50 HRs				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Tlty M. McCullough	A-1	3	2	5-18-92
BUS/PROP REPRESENTATIVE: Cindy McGinn	POSITION / TITLE: Owner			DATE: 5/18/92
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 00771

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ROCHESTER REGIONAL LIBRAR PHONE

BUSINESS OWNER

ADDRESS E203 ROCHESTER NY14607

PHONE 461 5440

BUSINESS EMERGENCY Janet Welch

ADDRESS

PHONE 425-1524

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO COMPLAINTS FOUND AT This Time. 14:30 HRS.				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT. M. McCullough	A-1	3	2	5-18-92
BUS/PROP REPRESENTATIVE: Georgia A Stern	POSITION / TITLE Secretary			DATE 5-18-92
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

INSPECTION # 00774

COMPANY A01

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME WHITE FRANCIS G ASSOCIATE PHONE
BUSINESS OWNER FRANCIS G WHITE
ADDRESS E310 ROCHESTER NY 14607
PHONE 442 6250
BUSINESS EMERGENCY
ADDRESS
PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No COMPLAINTS AT THIS TIME 15:00 HRS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
T.L.T. M. McCullough	A-1	3	2	5-18-92
BUS/PROP REPRESENTATIVE X	POSITION / TITLE			DATE 5/18/92
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ■
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 00302 GOODMAN ST N ARBOR INC

DATE RECEIVED IN FIRE SAFETY: 09/19/91 — DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
2/4/92			X			X		2-IN 2 FC B 2 CORR 2 ORDS VERBL		EF.
3/20/92										
3-31-92								Done	X	

GOVE BLDG 302 Fire Safety Division Fire Department GRAPHIC CAREERS

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 00007

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	~~274~~ 302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES | GENERAL PROPERTY USE 51 | SPECIFIC PROPERTY USE | STRUCTURE TYPE 2 | STRUCTURE STATUS 2

NO ENTRY DATES:

BUSINESS NAME ~~ARBOR INC~~ GRAPHIC CAREERS INC PHONE 271-~~7540~~ 4900

BUSINESS OWNER ~~GAIL VAN AUKER~~ John Vanderwood

ADDRESS E303 ROCHESTER NY14607

BUSINESS EMERGENCY ~~106 Florence Ave~~ Dennis Miner PHONE 223-6899 ~~865-8459~~

ADDRESS Rochester NY 14616 PHONE 223-6899 ~~865-8459~~

A/E INSPECTION

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
3rd FL	exit door has dead bolt + Keyed lock	✓		X	
North wall	on it.				
center wall	exit lights out	✓		X	
+ main entrance					
# 4TH	Exit Light Out R. [illegible] 3/31/92		X		
# 4TH	Extension Cord For Machines 3/31/92		X		
	violations not corrected at time of				
	reinspection 9/17/91				

OFFICER PREPARING REPORT: TKT B. Costello	COMPANY	DISTRICT	GROUP	DATE 5-20-91
BUS/PROP REPRESENTATIVE: Gail Van Auker	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: E. Fenonte				DATE 3/4/92

COPY TO FIRE SAFETY

RFD 501 REV. 12/90

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 12273

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ARBOR INC PHONE

BUSINESS OWNER JOHN VANDERWOOD

ADDRESS E303 ROCHESTER NY 14607

PHONE 271 4900

BUSINESS EMERGENCY DENNIS MINER

ADDRESS

PHONE 223 6899

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR: E. Fremente				DATE 3/4/92

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

INSPECTION # 02011

COMPANY A01

ADDRESS GOODMAN ST. NORTH FROM / TO ~~PRINCE ST~~ ~~10~~ 302 TAX ACCT # 005346-01.1

PROPERTY OWNER CLIFFORD M DAVIE ADDRESS 533 UNIVESITY AV PHONE 442-7380
CITY ROCHESTER STATE NY ZIP 14607

MAILING NAME CLIFFORD M DAVIE ADDRESS 533 UNIVERSITY AV PHONE
CITY ROCHESTER STATE NY ZIP 14607

EMERGENCY CONTACT CLIFFORD M DAVIE ADDRESS 533 UNIVERSITY AV PHONE 442-7380
CITY ROCHESTER STATE NY ZIP 14607

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	59	591	2	2

NO ENTRY DATES:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME GRAPHIC CAREERS PHONE
BUSINESS OWNER DENNIS T MINER
ADDRESS ~~40 PRINCE ST~~ 302 N. GOODMAN ST. ROCHESTER NY 14607
BUSINESS EMERGENCY DENNIS MINER PHONE 271 4900 suite 401
ADDRESS 4 BIRLING GAP FAIRPORT NY 14534
PHONE 223 6899

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No violations at time of Inspection				

OFFICER PREPARING REPORT: R. L. King COMPANY A1 DISTRICT GROUP 5 DATE 9/9/91

BUS/PROP REPRESENTATIVE: POSITION / TITLE DATE

FIRE SAFETY INSPECTOR: DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 01965

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

NO ENTRY DATES:

BUSINESS NAME ~~ARBOR INC~~ PHONE
BUSINESS OWNER ~~GAIL VAN AUKER~~
ADDRESS E303 ROCHESTER NY 14607
PHONE 271 7540

BUSINESS EMERGENCY
ADDRESS
PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	Area Vacated No Longer in Business				

OFFICER PREPARING REPORT	COMPANY	DISTRICT	GROUP	DATE
Lt John Doran	A1		4	8/6/91
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 01974

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME WHITE FRANCIS G ASSOCIATE PHONE

BUSINESS OWNER
ADDRESS E310 ROCHESTER NY 14607
PHONE 442 6250

BUSINESS EMERGENCY
ADDRESS
PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT

DISPOSITION by FIRE SAFETY:

REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
Lt John Vaccaro	A-1		4	8/6/91
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE 8/6/91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 01967

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME KONOFF LOUIS F E R A ARCH PHONE

BUSINESS OWNER

ADDRESS E212 ROCHESTER NY 14607

PHONE 244 0050

BUSINESS EMERGENCY

ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	No VIOLATIONS AT INSPECTION				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J. CAUFIELD	A1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: DEBBIE PAKAN	POSITION / TITLE: CLERK			DATE 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 01968

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME LEARNING CONNECTION THE PHONE

BUSINESS OWNER S SEITZ

ADDRESS E307 ROCHESTER NY 14607

PHONE 244 4990

BUSINESS EMERGENCY

ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT INSPECTION				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
TLT J. CAUFIELD	A1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: CINDY McGLYNN	POSITION / TITLE: DIRECTOR			DATE 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 01969

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ~~PERIPHERAL SERVICES~~ PHONE 244-4990
BUSINESS OWNER LEARNING CONNECTION THE
ADDRESS E306 ROCHESTER NY 14607
PHONE ~~244-1970~~
BUSINESS EMERGENCY
ADDRESS PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	CURRENTLY OCCUPIED BY THE LEARNING CONNECTION SUITES 306 AND 307				
	NO VIOLATIONS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
	A1	~~A~~ 13	4	7-26-91
BUS/PROP REPRESENTATIVE: CINDY McGLYNN	POSITION / TITLE: DIRECTOR			DATE 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY: A01

INSPECTION # 01970

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME: ROCHESTER PROFESSIONAL BU PHONE:

BUSINESS OWNER

ADDRESS: E202 ROCHESTER NY 14607

PHONE: 442 3360

BUSINESS EMERGENCY:

ADDRESS:

PHONE:

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	X10 VIOLATIONS AT INSPECTION				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
TLT J. CAUFIELD	A-1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: DEBBIE PAKAN	POSITION / TITLE: CLERK			DATE: 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 01971

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ROCHESTER REGIONAL LIBRAR PHONE

BUSINESS OWNER

ADDRESS E203 ROCHESTER NY 14607

PHONE 461 5440

BUSINESS EMERGENCY

ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT INSPECTION				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J. CAUFIELD	A1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: SUE VAN DER WALL	POSITION / TITLE: EXEC. SEC.			DATE 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY A01

INSPECTION # 01972

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME SCHWARZ RALPH C & SONS IN PHONE

BUSINESS OWNER RALPH SCHWARZ

ADDRESS E309 ROCHESTER NY 14607

PHONE 271 4696

BUSINESS EMERGENCY JAMES SCHWARZ

ADDRESS 165 GLEN ELLYN WY ROCHESTER NY 14618

PHONE 473 6521

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT INSPECTION				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
TLT J. CAUFIELD	A1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: MR. SCHWARZ	POSITION / TITLE: OWNER			DATE: 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 01973

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME: TELECOMMUNICATIONS BANK I PHONE:

BUSINESS OWNER

ADDRESS: E207 ROCHESTER NY 14607

PHONE: 442 2040

BUSINESS EMERGENCY

ADDRESS: PHONE:

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT INSPECTION				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT J. CAUFIELD	A1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: DEBBIE PAKAN	POSITION / TITLE: CLERK			DATE: 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 01966

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	161	2	2

NO ENTRY DATES:

BUSINESS NAME HILLY'S CAFE' & WINE BAR PHONE
BUSINESS OWNER ~~M STERN~~ Richard Moore
ADDRESS ~~302 N GOODMAN ST~~ 10 Buckingham St. ROCHESTER NY 14607
PHONE ~~271-0820~~ 461-4181
BUSINESS EMERGENCY ~~M STERN~~
ADDRESS ~~40 EVANDALE RD~~ ~~ROCHESTE00302 GOODMAN~~
Same as above PHONE ~~461-9867~~ 461-4181
SPECIAL INSTRUCTIONS:
SPECIAL HAZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
Kitchen	@ Microwave — Light fixture powered by extension cord & needs to be hard wired.			✓	
Kitchen	Clean grease from hood & grates above stoves			✓	
Dry Good Room	Combustibles around H20 Tank & Cover off electrical box			✓	
Hostess Stand	Wire Mold Feed to Junction Box			✓	
	No other violations found @ this time				

OFFICER PREPARING REPORT	COMPANY	DISTRICT	GROUP	DATE
Terry R. Speck	A1	A1	4	7/26/91
BUS/PROP REPRESENTATIVE: Frank C. Nye.	POSITION / TITLE: owner			DATE 7/26/91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

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Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01

INSPECTION # 01964

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

NO ENTRY DATES:

BUSINESS NAME ALLEN-BAILEY TAG & LABEL PHONE

BUSINESS OWNER
ADDRESS E206 ROCHESTER NY 14607
PHONE 442 2690

BUSINESS EMERGENCY
ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT INSPECTION.				

DISPOSITION by FIRE SAFETY:

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
J. CAUFIELD TCT	A-1	3	4	7-26-91
BUS/PROP REPRESENTATIVE: DEBBIE PAKAN	POSITION / TITLE: CLERK			DATE 7-26-91
FIRE SAFETY INSPECTOR:				DATE

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ☐
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 302 N GOODMAN STREET — GRAPHIC CAREERS

DATE RECEIVED IN FIRE SAFETY: DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
7-19-91						X		1 RE - 2 CORR		
8-7-91						X		1 RE - 1 CORR	X	

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

INCIDENT # | INSPECTION # 8

ADDRESS

PROPERTY OWNER Gary Sterns	ADDRESS Village Gate Office	PHONE 442-9061
EMERGENCY CONTACT John Vanderwood	ADDRESS 187 Frontenac Hight 14617	PHONE 338-2908
COMPLAINANT	ADDRESS	PHONE

NFPA 901 CODES | GENERAL PROPERTY USE | SPECIFIC PROPERTY USE | STRUCTURE TYPE | STRUCTURE STATUS

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS: NAME Graphic Careers PHONE 271-4900
OWNER John Vanderwood
ADDRESS 302 N. Goodman St PHONE 271 4900
EMERGENCY CONTACT John Vanderwood PHONE 338 2908

DISPOSITION by FIRE SAFETY:
NOT REQUIRED
CORRECTED
ORDERS ISSUED
REFERRED

DIRECTION, ROOM #, ETC.	NATURE of VIOLATION or COMPLAINT				
17	4th floor has sprinklers, emergency lights one pull box at the east exit, two means of egrees				
	no smoke detectors?				
	√ storage room needs gen. clean up			✓	
	√ stair towers are obstructed			✓	
	gas mains outside north of bldg are obstructed				
	Stand pipe & Sprinkler connections need caps (outside)				

OFFICER PREPARING REPORT:	COMPANY	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION/TITLE		DATE
FIRE SAFETY INSPECTOR:			DATE

FD501

COPY TO FIRE SAFETY

City of Rochester

FIRE SAFETY DIVISION

FOR INTERNAL USE ONLY

DATE May 23, 1991 PAGE ____ OF ____

BUSINESS NAME _____ OWNER: Gary Stern

MAILING ADDRESS _____ ZIP _____ ADDRESS: Village Gate

ADDRESS OF VIOLATIONS: 302 Goodman St CITY: Rochester New York ZIP _____

ATTENTION: _____ REINSPECTION DATE: June 17, 1991

CODE VIOLATION #	DESCRIPTION and/or LOCATION OF VIOLATION
C-of-7-19-91 1163.2d	Gas meter shut-off inaccessible (dumpster and wood pallets shall be removed)
C-of-7-19-91 1162.2c	Stairways and corridors shall be free of any obstructions
1163.13b-1	Sprinkler systems shall be maintened in good order. Fire dept connection needs caps and needs to be clean out (the pipe itself)

FD506-A

INSPECTOR: Carlos H. Manns IBM # 6911

City of Rochester

FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL

NOTICE OF VIOLATIONS

Room 300
Public Safety Building
Civic Center Plaza
Rochester, New York 14614
(716) 428-7037

Gary Stern
Village Gate
Rochester, New York 14607

May 30, 1991

PLEASE TAKE NOTICE THAT an inspection at 302 N. Goodman Street, Rochester, New York reveals violation(s) of the Fire Prevention Code of the City of Rochester and/or the Codes, Rules and Regulations of the State of New York.

Orders are hereby issued for the violation(s) to be corrected on or before the reinspection scheduled for June 17, 1991. Failure to comply with these orders will result in the issuance of a Municipal Code Violation Summons for each uncorrected violation with the following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 50.00	$100.00
2nd OFFENSE	100.00	200.00
3rd OFFENSE	250.00	500.00

During this period, the property owner continues to be responsible and liable for any damages arising from the violation(s).

Relevant section(s) of the New York State Uniform Fire Prevention and Building Code (Title 9 NYCRR) to wit:

1162.2c Materials shall not be placed, stored, or kept in stairways or corridors.
STARIWAYS AND CORRIDORS SHALL BE FREE OF ANY OBSTRUCTIONS.

1162.2d No aisle or passageway shall be obstructed so as to reduce its required width as an exit.
GAS METER SHUT OFF INACCESSIBLE (DUMPSTER AND WOOD PALLETS SHALL BE REMOVED).

1163.13b-1 Sprinkler system shall be maintained in operative condition, free from mechanical injury, structural failure, water failure, or obstructions. Sprinklers shall be maintained clear and free from corrosion, paint, whitewash and other coatings which impair their operation. Such sprinkler system shall be tested on a semi-annual basis. <CI-167>
SPRINKLER SYSTEMS SHALL BE MAINTAINED IN GOOD ORDER. FIRE DEPARTMENT CONNECTION NEED CAPS AND NEED TO BE CLEAN OUT (THE PIPE ITSELF).

BY ORDER OF THE FIRE MARSHAL INSPECTOR Carlos H. Manns 6911 8-7-91

DATE OF COMPLAINCE 8/2/91 INSPECTOR

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL ■
PUBLIC ED ☐
PERMIT ☐
HIGH-RISE ☐

LOCATION: 00302 GOODMAN ST N MAYBECK BUCHER VOLLAND DD

DATE RECEIVED IN FIRE SAFETY: APR 19 1991 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
5-3-91							X	1 Corr	X	Rob

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01

INSPECTION #: 00632

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER: GARY I STERN
ADDRESS: 274 N GOODMAN ST
PHONE: 442-9061
CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: STERN REALTY
ADDRESS: 274 N GOODMAN ST
CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: GARY I STERN
ADDRESS: 40 EVANDALE RD
PHONE: 461-9867
CITY: ROCHESTER STATE: NY ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

NO ENTRY DATES:

BUSINESS NAME: MAYBECK BUCHER VOLLAND CO PHONE:
BUSINESS OWNER: EDWARD E MAYBECK
ADDRESS: E402 ROCHESTER NY 14607
PHONE: 473 7339
BUSINESS EMERGENCY: EDWARD E MAYBECK
ADDRESS: 56 RAND PL PITTSFORD NY 14534
PHONE: 385 2225

SPECIAL INSTRUCTIONS:

SPECIAL HAZARDS OR CONSTRUCTION

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	Boxes in front of Exit Door			X	

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE 5-3-9;

RFD 501 REV. 12/90

COPY TO FIRE SAFETY

FD570

FIRE SAFETY INSPECTION RECORD

☐ LICENSE

GENERAL
PUBLIC ED
PERMIT
HIGH-RISE

LOCATION: 00302 GOODMAN ST N HILLY'S CAFE' & WINE BAR

DATE RECEIVED IN FIRE SAFETY:

NOV 6 1990

DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
11-20-90			X							
11-28-90	10:00							Hillys Cafe 4 vio 4 con	X	
								MAYBECK 2 vio 2 con -	X	

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60939

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03-0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	161	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME HILLY'S CAFE' & WINE BAR PHONE
BUSINESS OWNER M STERN
ADDRESS 302 N GOODMAN ST ROCHESTER NY 14607
PHONE 271 8820
BUSINESS EMERGENCY M STERN
ADDRESS 40 EVANDALE RD ROCHESTE00302 GOODMAN
PHONE 461 9867
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
STORAGE	COMBUSTIBALS ON AND AROUND FURNACE			X	
KITCHEN	EXTENSION CORDS THROUGH THE WALL			X	
"	UNMOUNTED FIRE EXTINGUISHER			X	
	EXIT LIGHT OUT			X	
	REINSPECTION 6-13-90				

OFFICER PREPARING REPORT: LT. D MAYER	COMPANY A-1	DISTRICT	GROUP I	DATE 5/9/90
BUS/PROP REPRESENTATIVE: B Westcott	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE 11-26-90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

COMPANY: A01

INSPECTION #: 60941

ADDRESS: GOODMAN ST N — FROM / TO: 302 — TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN — ADDRESS: 274 N GOODMAN ST — PHONE: 442-9061
CITY: ROCHESTER — STATE: NY — ZIP: 14607

MAILING NAME: STERN REALTY — ADDRESS: 274 N GOODMAN ST — PHONE:
CITY: ROCHESTER — STATE: NY — ZIP: 14607

EMERGENCY CONTACT: GARY I STERN — ADDRESS: 40 EVANDALE RD — PHONE: 461-9867
CITY: ROCHESTER — STATE: NY — ZIP: 14618

NFPA 901 CODES — GENERAL PROPERTY USE: 51 — SPECIFIC PROPERTY USE: 594 — STRUCTURE TYPE: 2 — STRUCTURE STATUS: 2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: MAYBECK BUCHER VOLLAND CO — PHONE:
BUSINESS OWNER: EDWARD E MAYBECK
ADDRESS: E402 ROCHESTER NY14607
PHONE: 473 7339
BUSINESS EMERGENCY: EDWARD E MAYBECK
ADDRESS: 56 RAND PL PITTSFORD NY14534
PHONE: 385 2225

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	EXIT LIGHTS OUT ALL			X	
KITCHEN	SWITCH PLATE COVER MISSING			X	
	REINSPECTION 6-13-90				

OFFICER PREPARING REPORT: LT. D. MAYER — COMPANY: A-1 — DISTRICT: — GROUP: I — DATE: 5/9/90

BUS/PROP REPRESENTATIVE: Bonnie Bonne — POSITION / TITLE: — DATE:

FIRE SAFETY INSPECTOR: [signature] — DATE: 11-28-90

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60936

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES | GENERAL PROPERTY USE 51 | SPECIFIC PROPERTY USE | STRUCTURE TYPE 2 | STRUCTURE STATUS 2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME EMPIRE CAREER CENTER PHONE
BUSINESS OWNER
ADDRESS E401 ROCHESTER NY 14607
PHONE 461 3881
BUSINESS EMERGENCY
ADDRESS
PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY: REFERRED | ORDERS ISSUED | CORRECTED | NOT REQUIRED

DIRECTION ROOM #, ETC.	COMPLAINT
	NO LONGER A BUSINESS

OFFICER PREPARING REPORT: LT. D. MAYER	COMPANY A-1	DISTRICT	GROUP I	DATE 5/9/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
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Rochester, New York 14614
(716) **428-7037**

BUILDING INSPECTION / COMPLAINT FORM

COMPANY A01 | INSPECTION # 60945

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #: 005000-03-0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: ROCHESTER REGIONAL LIBRAR | PHONE:
BUSINESS OWNER
ADDRESS: E203 ROCHESTER NY 14607
PHONE: 461 5440
BUSINESS EMERGENCY:
ADDRESS:
PHONE:
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
2	NORTH	EXIT LIGHT OUT			X	
1	HALL	" " "			X	

REINSPECTION 6-13-90

OFFICER PREPARING REPORT	COMPANY	DISTRICT	GROUP	DATE
LT. D. MAYER	A-1		I	5/9/90
BUS/PROP REPRESENTATIVE: Beverly Neder	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60934

ADDRESS: GOODMAN ST N 302 | FROM / TO | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	519	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: ALLEN-BAILEY TAG & LABEL | PHONE:
BUSINESS OWNER
ADDRESS: E206 ROCHESTER NY 14607
PHONE: 442 2690
BUSINESS EMERGENCY:
ADDRESS: | PHONE:
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY: REFERRED | ORDERS ISSUED | CORRECTED | NOT REQUIRED

DIRECTION ROOM #, ETC.	COMPLAINT
	NO VIOLATIONS AT TIME OF INSPECTION

OFFICER PREPARING REPORT: LT. D. MAYER | COMPANY: A-1 | DISTRICT | GROUP: 1 | DATE: 5/9/90

BUS/PROP REPRESENTATIVE: Mary F. Stickel | POSITION / TITLE | DATE

FIRE SAFETY INSPECTOR: | DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

BUILDING INSPECTION / COMPLAINT FORM

COMPANY: A01

INSPECTION #: 60935

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03-0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: CONGE ROBERT A PHONE:
BUSINESS OWNER
ADDRESS: E304 ROCHESTER NY 14607
PHONE: 473 0291
BUSINESS EMERGENCY:
ADDRESS:
PHONE:
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO LONGER A BUSINESS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT. D. MAYER	A-1		H	5/9/80
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60940

ADDRESS: GOODMAN ST N 302 | FROM / TO | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: KONOFF LOUIS P E R A ARCH | PHONE:
BUSINESS OWNER
ADDRESS: E212 ROCHESTER NY 14607
PHONE: 244 0050
BUSINESS EMERGENCY:
ADDRESS: | PHONE:
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

OFFICER PREPARING REPORT: LT. D. MAYER	COMPANY A-1	DISTRICT	GROUP H	DATE 5/9/90
BUS/PROP REPRESENTATIVE: Mary F. Michel	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 — INSPECTION # 60943

ADDRESS		FROM / TO	TAX ACCT #
GOODMAN	ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	594	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME R C CONSULTANTS & DEVELOP — PHONE
BUSINESS OWNER
ADDRESS E208 ROCHESTER NY 14607
PHONE 244 4570
BUSINESS EMERGENCY
ADDRESS — PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO LONGER A BUSINESS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT. D. MAYER	A-1		I	5/9/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 INSPECTION # 60937

ADDRESS: GOODMAN ST N 302 FROM / TO: 005000-03-0 TAX ACCT #

PROPERTY OWNER: GARY I STERN ADDRESS: 274 N GOODMAN ST PHONE: 442-9061

CITY: ROCHESTER STATE: NY ZIP: 14607

MAILING NAME: STERN REALTY ADDRESS: 274 N GOODMAN ST PHONE:

CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: GARY I STERN ADDRESS: 40 EVANDALE RD PHONE: 461-9867

CITY: ROCHESTER STATE: NY ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: GULLO PROPERTIES PHONE:

BUSINESS OWNER

ADDRESS: E216 ROCHESTER NY 14607 PHONE: 442 7338

BUSINESS EMERGENCY

ADDRESS PHONE

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO LONGER A BUSINESS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
LT. D. MAYER	A-1		1	5/9/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60938

ADDRESS: GOODMAN ST N | FROM / TO: 302 | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 274 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: ~~HERMAN I H INC~~ THE LEARNING CONNECTION | PHONE: 244-4990
BUSINESS OWNER: S. SEITZ
ADDRESS: E307 ROCHESTER NY 14607
PHONE: ~~244~~ 315 524-9124
BUSINESS EMERGENCY:
ADDRESS: | PHONE:

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

OFFICER PREPARING REPORT: LT. MAYER	COMPANY A-1	DISTRICT	GROUP I	DATE 5/9/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60944

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME ROCHESTER PROFESSIONAL BL PHONE
BUSINESS OWNER
ADDRESS E202 ROCHESTER NY 14607
PHONE 442 3360
BUSINESS EMERGENCY
ADDRESS
PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

OFFICER PREPARING REPORT: LT. D. MAYER	COMPANY A-1	DISTRICT	GROUP H	DATE 5/9/90
BUS/PROP REPRESENTATIVE: Mary J. Sackel	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY A01 | INSPECTION # 60946

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03.0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES | GENERAL PROPERTY USE 51 | SPECIFIC PROPERTY USE 591 | STRUCTURE TYPE 2 | STRUCTURE STATUS 2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME TELECOMMUNICATIONS BANK PHONE
BUSINESS OWNER
ADDRESS E207 ROCHESTER NY 14607
PHONE 442 2040
BUSINESS EMERGENCY
ADDRESS
PHONE
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSP				

OFFICER PREPARING REPORT: LT D. MAYER	COMPANY A-1	DISTRICT	GROUP I	DATE 5/9/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) **428-7037**

COMPANY: A01 | INSPECTION #: 60947

ADDRESS	FROM / TO	TAX ACCT #
GOODMAN ST N	302	005000-03-0

PROPERTY OWNER	ADDRESS	PHONE
GARY I STERN	274 N GOODMAN ST	442-9061
	CITY ROCHESTER STATE NY ZIP 14607	

MAILING NAME	ADDRESS	PHONE
STERN REALTY	274 N GOODMAN ST	
	CITY ROCHESTER STATE NY ZIP 14607	

EMERGENCY CONTACT	ADDRESS	PHONE
GARY I STERN	40 EVANDALE RD	461-9867
	CITY ROCHESTER STATE NY ZIP 14618	

NFPA 901 CODES | GENERAL PROPERTY USE: 51 | SPECIFIC PROPERTY USE: 591 | STRUCTURE TYPE: 2 | STRUCTURE STATUS: 2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: WHITE FRANCIS G ASSOCIATE PHONE:
BUSINESS OWNER
ADDRESS: E310 ROCHESTER NY 14607
PHONE: 442 6250
BUSINESS EMERGENCY
ADDRESS
PHONE:
SPECIAL INSTRUCTIONS:
SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO VIOLATIONS AT TIME OF INSPECTION				

OFFICER PREPARING REPORT: LT. D. MAYER	COMPANY: A-1	DISTRICT	GROUP: I	DATE: 5/9/90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

BUILDING INSPECTION / COMPLAINT FORM

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

COMPANY: A01 | INSPECTION #: 60114

ADDRESS: GOODMAN ST N | FROM / TO: 274 | TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY I STERN | ADDRESS: 274 N GOODMAN ST | PHONE: 442-9061
CITY: ROCHESTER | STATE: NY | ZIP: 14607

MAILING NAME: STERN REALTY | ADDRESS: 174 N GOODMAN ST | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51	591	2	2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

A01

BUSINESS NAME: WATERFAX/NSA | PHONE:
BUSINESS OWNER: ARLENE FRANCIS
ADDRESS: 274 N GOODMAN ST ROCHESTER NY 14607
PHONE: 461 5170
BUSINESS EMERGENCY: ARLENE FRANCIS
ADDRESS: 292 OXFORD ST ROCHESTER NY 14607
PHONE: 271 4926

SPECIAL INSTRUCTIONS:

SPECIAL HARZARDS OR CONSTRUCTION

DISPOSITION by FIRE SAFETY:

DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	NO LONGER IN BUSINESS				

OFFICER PREPARING REPORT:	COMPANY	DISTRICT	GROUP	DATE
R D Mayer	A-1		I	3-21-90
BUS/PROP REPRESENTATIVE:	POSITION / TITLE			DATE
FIRE SAFETY INSPECTOR:				DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

COMPANY: A01

INSPECTION #: 45237

ADDRESS: GOODMAN ST N

FROM / TO: 302

TAX ACCT #: 005000-03.0

PROPERTY OWNER: GARY STERN ~~CHARLES~~ ~~D~~ STERN

ADDRESS: 40 EVANDALE RD ~~433 FRENCH RD~~

PHONE: 461-9867 ~~244-8835~~

CITY: ~~PITTSFORD~~ STATE: NY ZIP: 14534

MAILING NAME: STERN REALITY STERN ~~DEVELOPMENT & MANAGEMEN~~

ADDRESS: 274 N. GOODMAN ST ~~433 FRENCH RD~~

PHONE: 442-9061 ~~442-8282~~

CITY: ROCHESTER STATE: NY ZIP: 14607

EMERGENCY CONTACT: GARY I STERN

ADDRESS: 40 EVANDALE RD

PHONE: 461-9867

CITY: ROCHESTER STATE: NY ZIP: 14618

NFPA 901 CODES | GENERAL PROPERTY USE: 51 | SPECIFIC PROPERTY USE: 591 | STRUCTURE TYPE: 2 | STRUCTURE STATUS: 5

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: VARIOUS PHONE:
BUSINESS OWNER
ADDRESS
PHONE
BUSINESS EMERGENCY
ADDRESS
PHONE

SPECIAL INSTRUCTIONS:

DISPOSITION by FIRE SAFETY:

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
2	NORTH HALLWAY	TWO EXIT LIGHTS OUT			X	
3	CITE OR ROCH	TWO EXIT LIGHTS OUT			X	
1	N FRONT	MARK STANDPIPE			X	

Re-inspection
8-7-89
Capt Hi Charis
ALL CORRECT

DC - 428-5970
428-5963

OFFICER PREPARING REPORT: Capt Hi Charis | COMPANY: A-1 | DISTRICT: A-1 | GROUP: 2. | DATE: 6-9-89

BUS/PROP REPRESENTATIVE: Gary Stern | POSITION / TITLE | DATE

FIRE SAFETY INSPECTOR: | DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

COMPANY A01 INSPECTION # 45238

ADDRESS GOODMAN ST N FROM / TO 302 TAX ACCT # 005000-03.0

PROPERTY OWNER GARY ~~CHARLES~~ ~~B~~ STERN ADDRESS 40 EVANDALE RD ~~433 FRENCH RD~~ PHONE 461-9867 ~~244-6835~~
CITY ~~PITTSFORD~~ STATE NY ZIP 14534

MAILING NAME REALITY STERN ~~DEVELOPMENT & MANAGEMEN~~ ADDRESS 274 N. GOODMAN ST ~~433 FRENCH RD~~ PHONE 442-9061 ~~[illegible]~~
CITY ROCHESTER STATE NY ZIP 14607

EMERGENCY CONTACT GARY I STERN ADDRESS 40 EVANDALE RD PHONE 461-9867
CITY ROCHESTER STATE NY ZIP 14618

NFPA 901 CODES | GENERAL PROPERTY USE 51 | SPECIFIC PROPERTY USE 161 | STRUCTURE TYPE 2 | STRUCTURE STATUS 2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME HILLY'S CAFE' & WINE BAR PHONE
BUSINESS OWNER M STERN
ADDRESS 302 N GOODMAN ST ROCHESTER NY14607
PHONE 271 8820
BUSINESS EMERGENCY M STERN
ADDRESS 40 EVANDALE RD ROCHESTE00302 GOODMAN
PHONE 461 9867

DISPOSITION by FIRE SAFETY:

SPECIAL INSTRUCTIONS:

	DIRECTION ROOM #, ETC.	COMPLAINT	REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
1	OFFICE	OVER LOADED EXTENSION CORD			X	
1	KITCHEN	HOOD OVER DEEP FRYER NEEDS CLEANING			X	
1	"	EXTINGUSHERS NEED TO BE HUNG			X	

Violations corrected 7-27-89

OFFICER PREPARING REPORT: [signature] COMPANY A-1 DISTRICT A-1 GROUP 2 DATE 6-8-89
BUS/PROP REPRESENTATIVE: [signature] POSITION / TITLE G.M DATE 6/8/89
FIRE SAFETY INSPECTOR: DATE

COPY TO FIRE SAFETY

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza – 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

COMPANY: Q04 | INSPECTION #: 036676

ADDRESS: GOODMAN ST N | FROM / TO: 302 | SBL #: 005000-03.0

PROPERTY OWNER: CHARLES D STERN | ADDRESS: 433 FRENCH RD | PHONE: 244-6835
CITY: PITTSFORD | STATE: NY | ZIP: 14534

MAILING NAME: VILLAGE GATE MALL | ADDRESS: 176 ANDERSON AVE | PHONE:
CITY: ROCHESTER | STATE: NY | ZIP: 14607

EMERGENCY CONTACT: GARY I STERN | ADDRESS: 40 EVANDALE RD | PHONE: 461-9867
CITY: ROCHESTER | STATE: NY | ZIP: 14618

NFPA 901 CODES	GENERAL PROPERTY USE	SPECIFIC PROPERTY USE	STRUCTURE TYPE	STRUCTURE STATUS
	51		2	8

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS NAME: AMBITION MANAGEMENT | PHONE:
BUSINESS OWNER:
ADDRESS:
PHONE:
BUSINESS EMERGENCY:
ADDRESS:
PHONE:

DIRECTION, ROOM #, ETC.	COMPLAINT	DISPOSITION by FIRE SAFETY: REFERRED	ORDERS ISSUED	CORRECTED	NOT REQUIRED
	OUT OF BUSINESS 5/26/88				

OFFICER PREPARING REPORT: LT. R. BRESCIA | COMPANY: Qlu-4 | GROUP: 1 | DATE: 5-26-88

BUS/PROP REPRESENTATIVE: | POSITION / TITLE | DATE

FIRE SAFETY INSPECTOR: | DATE

RFD 501 (2/88)

COPY TO FIRE SAFETY

800453

FIRE SAFETY INSPECTION RECORD

☐ LICENSE
☐ TANK REMOVAL

GENERAL PUBLIC ED. ☐
PERMIT ☐

LOCATION: 302 N. GOODMAN ST — HILLY'S CAFE & WINE BAR

DATE RECEIVED IN FIRE SAFETY MAY 20 1988 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
5-24-88				X				Invol. connected Invol. issued		Parina
6-14-88					X					Parina
6-28-88					X					Parina
7-7-88					X			Waiting for Eqt. Co. to come out to recharge system		Parina
7-14-88										
8-1-88			X					Closed		Parina
8-8-88		7-21-88 For Compliance						Rech. Fire Eqpt. System was serviced.		Parina
8-23-88					X					Parina
9-13-88					X					Parina
9-29-88						X		Invol. canceled	X	Parina

Fire Safety Division
Fire Department

City of Rochester

Public Safety Building
Civic Center Plaza - 3rd Floor
Rochester, New York 14614
(716) 428-7037

BUILDING INSPECTION / COMPLAINT FORM

INCIDENT # 302

INSPECTION # 8 800453

ADDRESS 274 N. Goodman St

PROPERTY OWNER Gary Stein	ADDRESS 40 Evandale Rd	PHONE 461-9867
EMERGENCY CONTACT Same	ADDRESS	PHONE
COMPLAINANT	ADDRESS	PHONE

NFPA 901 CODES — GENERAL PROPERTY USE 51 — SPECIFIC PROPERTY USE 161 — STRUCTURE TYPE 2 — STRUCTURE STATUS 2

A = ATTIC
C = CELLAR
G = GARAGE
O = OUTSIDE
# = FLOOR #

BUSINESS: PHONE 271 8820
NAME Hillys
OWNER M. Stein
ADDRESS 40 Evandale Rd 14618 PHONE 461 9867
EMERGENCY CONTACT Same PHONE

DISPOSITION by FIRE SAFETY:

	DIRECTION, ROOM #, ETC.	NATURE of VIOLATION or COMPLAINT	NOT REQUIRED	CORRECTED	ORDERS ISSUED	REFERRED
1	Ketchen	5# CO_2 not mounted			X	
		Re-Inspected on 5/17/87				
		Ansul System in Ketchen 1163.12c overdue for service Capt C Salina QM/4		X		

OFFICER PREPARING REPORT: Lt Weisensel	COMPANY E-5	GROUP 2	DATE 9-24-87
BUS/PROP REPRESENTATIVE: Robert Teresa	POSITION/TITLE Waiter		DATE 9-24-87
FIRE SAFETY INSPECTOR: Robert Parina	6587		DATE 5-24-88

FD501

COPY TO FIRE SAFETY

Fire Dept.
Fire Safety Division
Public Safety Bldg.
Rochester, N.Y. 14614

OFFICE OF THE
FIRE MARSHAL
TELEPHONE: 428-7037

NOTICE OF VIOLATIONS

DATE 5-24-88

M. Stein
Name

40 Evandale Rd.
Address

Inspection of premises located at 302 N. Goodman St. reveals violations of the Fire Prevention Code. Orders are hereby issued for correction of hazards listed herewith on or before: 6-14-88.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 50	$100
2nd OFFENSE	$100	$200
3rd & SUBSEQUENT	$250	$500

9 N.Y.C.R.R.
1163.12c Ansul Systems over both stoves shall be checked and updated O.K. at this time 9-29-88

By Order of
FIRE MARSHAL

INSPECTOR Robert Panis 6587

DATE of COMPLIANCE 9-29-88

Inspector Robert Panis 6587

FD506

CITY OF ROCHESTER NEW YORK

FIRE DEPARTMENT

DATE 20 Nov. 1986

FROM: Captain Anthony G. Orlando

TO: Deputy Chief James Payne Group 4

SUBJECT: HILLY'S CAFE & WINE BAR - 302 N. GOODMAN ST.

Dear Sir:

In answer to your request, Lt. Robert Steger checked the premises of Hilly's and found they have the Building Bureau's approval for how they vent their cooking area. Also, the fan is of an approved type. I share your concern in this matter and will initiate a file to document future citizen's complaints regarding the fumes. In this way, perhaps a case can be made for the installation of some sort of vertical duct work.

Thank you for this opportunity to assist you and I remain,

Respectfully,

NAME Anthony N. Orlando TITLE CAPTAIN

COMPANY/DIVISION - FIRE SAFETY DIVISION - GROUP N/A

FD 106

FD570 [71835] FIRE SAFETY INSPECTION RECORD

☐ LICENSE
☐ TANK REMOVAL

GENERAL PUBLIC ED. PERMIT

LOCATION: 302 N. GOODMAN ST SCHNOZZ'S

DATE RECEIVED IN FIRE SAFETY: OCT 22 1987

DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
10-28-87		271-2961	X							Pavina
11-6-87		271-8334						Talked to owner and he'll comply	X	Pavina

ROCHESTER, NEW YORK FIRE DEPARTMENT FIELD INCIDENT REPORT

ALARM

INCIDENT #	BOX #	NODE #	ADDRESS NUMBER	STREET	TYPE	DIR
A 7102/4		33014	302	GOODMAN		STN

DATE MO	DA	YR	DAY OF WEEK	WEATHER COND	TEMP	ALARM TYPE
10	18	87	1	2	4	1

TIMES

FIRST ALARM

TIME OF ALARM	CODE 9 ENGINE	CODE 9 TRUCK	UNDER CONTROL	CODE 2 TIME
01:41	01:45			0203

EXTRA UNITS SENT

TIME OF ALARM	CODE 9 ENGINE	CODE 9 TRUCK	TIME OF ALARM	CODE 9 ENGINE	CODE 9 TRUCK

SECOND ALARM

TIME OF ALARM	CODE 9 ENGINE	CODE 9 TRUCK

RESPONSE

FIRST ALARM

UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R
BC3	W														

EXTRA UNITS SENT

UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R

MULTIPLE ALARM

UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R
UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R	UNIT	W/R

DESCRIPTION OF INCIDENT

INC TYPE	TYPE CONST	STORIES	SPECIFIC PROPERTY USE	MOBILE PROP TYPE	AREA OF ORG.	EQUIP INV	FORM OF HEAT IGN	FORM MAT'L	TYPE MAT'L	IGN FACTOR	CODE 5
91											

YEAR	MAKE	MODEL	LICENSE NUMBER	SERIAL NUMBER	VOLTAGE

FIRE EXTENDED TO _____ EXT OF FLAME DMG

OWNER/OCCUPANT

OWNER INITIALS	NAME	OCCUPANT INITIALS	NAME
D	CULTRARA		SCHNOZZS BAR

OWNER ADDRESS NUMBER	STREET	TYPE	DIR	CITY	STATE	ZIP

EQUIPMENT USED

NUMBER USED BOOST	1 1/2"	1 3/4"	2 1/2"	3"	M.S.	OXY	PORT ABLE	FOAM	AMOUNT OF WATER USED	SPKLR	STAND PIPE	HYD PRESS	HYD COND	SMOKE DET	ENTRY

AFTERMATH

DOLLAR LOSS OF PROPERTY	NUMBER OF RESCUES	INJURED CIV.	INJURED F.F.	DEAD CIV.	DEAD F.F.	REFERRED TO: FIRE SAFETY	FIRE INVESTIGATION

REMARKS _____

RANK	INIT	NAME	GRP CPY	BATT	SIGNED
BC	G	MCHUGH	2	BAT 3	

RFD 101

OIC LAMBERTON

F.S.

CITY OF ROCHESTER NEW YORK

FIRE DEPARTMENT

DATE 10-18 L9 87

FROM: B/C G. McHUGH

TO: FIRE CHIEF L.J. HUETHER

SUBJECT: OVERCROWDING. INC# 710214

SIR,

ON THIS DATE AT 0141 HRS. THE FIRE DISPATCHER RECEIVED AN OVERCROWDING COMPLAINT FOR SCHNOZZ'S BAR 302 N. GOODMAN ST FROM A. MONICA BEANE.

BATTALION THREE RESPONDED TO THE ABOVE ADDRESS AND OBSERVED APROXIMATELY 200 + PEOPLE MOST OF WHICH WERE LEAVING THE BAR. I SPOKE WITH MR DAVID CULTRARA WHO IDENTIFIED HIMSELF AS ONE OF THE OWNERS. I ADVISED MR. CULTRARA THAT HIS CAPACITY WAS 150 PEOPLE AND WHEN HE WENT OVER HIS CAPACITY HE WAS ENDANGERING LIVES AND IT WOULD NOT BE ~~THERE~~ ACCEPTABLE. I SUGGESTED THAT THE BOUNCER HE HAD STATIONED AT THE DOOR KEEP A MORE ACCURATE COUNT IN THE FUTURE

NAME [signature] TITLE B/C

COMPANY/DIVISION B-3 LINE GROUP II

FD 106

RECEIVED
FIRE CHIEF'S OFFICE
87 OCT 19 AM 10: 07

701296 FIRE SAFETY INSPECTION RECORD

☒ LICENSE ☐ TANK REMOVAL

GENERAL PUBLIC ED. PERMIT

LOCATION: 302 N. GOODMAN ST SHNOZZ'S 271 8334

DATE RECEIVED IN FIRE SAFETY: AUG 26 1987 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
2 Sept 87			X							Thompson
8 Sept 87		271-2961	X					Called owner and made appt. for insp.		Parina
9-9-87	10:00								X	Parina

FD570 701302 FIRE SAFETY INSPECTION RECORD

[A] LICENSE
[ ] TANK REMOVAL

GENERAL PUBLIC ED. PERMIT

LOCATION: 302 N. Goodman St Shnuzz's 271-8334

DATE RECEIVED IN FIRE SAFETY: AUG 19 1987 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
2 Sept 87			/							Thomas
8 Sept 87										
9-9-87									X	Parina

FD575 00373 FIRE SAFETY INSPECTION RECORD

214

LICENSE ☐ TANK REMOVAL

GENERAL PUBLIC ED. PERMIT

LOCATION: 302 N. GOODMAN ST

SHNOZZ'S INC

271 8334

DATE RECEIVED IN FIRE SAFETY: MAR 24 1987 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
3-26-87			X					DAVID CULTRARA 467 2961 467 PARK AV/07		Parma
3-30-87	10 am							O.K. at time of inspection	X	Parma

STERN REALTY CO 4429061
274 N. GOODMAN ST/07

505296

FD570 FIRE SAFETY INSPECTION RECORD ☐ LICENSE ☐ TANK REMOVAL GENERAL PUBLIC ED. PERMIT

LOCATION: 302 N. GOODMAN STREET AMBITION MANAGEMENT

DATE RECEIVED IN FIRE SAFETY: / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
								005000-03.0		
09/05/85		Mike Green	X							Lt. Eldridge
11/12/85									X	Lt Eldridge

Fire Dept.
Fire Safety Division
Public Safety Bldg.
Rochester, N.Y. 14614

OFFICE OF THE
FIRE MARSHAL
TELEPHONE: 428-7037

NOTICE OF VIOLATIONS

DATE Sept. 5, 1985

Ambition Management (Name) 302 N. Goodman St (Address)

Inspection of premises located at Same reveals violations of the Fire Prevention Code. Orders are hereby issued for correction of hazards listed herewith on or before: 30 days from issue 9/5/85.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 50	$100
2nd OFFENSE	$100	$200
3rd & SUBSEQUENT	$250	$500

(1) Exit sign, illuminated, required at end of hallway indicating direction to fire escape

(2) Signs needed for windows showing escape.

(3) Fire drills required

x Mikell Green - Grand

By Order of
FIRE MARSHAL

INSPECTOR Lt Lloyd Eldridge

DATE of COMPLIANCE _____ Inspector _____

FD506

FD570 503369 FIRE SAFETY INSPECTION RECORD

☐ LICENSE ☐ TANK REMOVAL GENERAL PUBLIC ED. PERMIT

LOCATION: 302 N GOODMAN ST SHNOZZ'Z INC 271 8334

DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
DATE RECEIVED IN FIRE SAFETY JUL 26 1985								VILLAGE GATE SQ 442 9168 274 N GOODMAN ST 14607 005000-03.0		
8-1-85			X					DAVID CULTRONG 271 2961 467 PARK AV/07		Shub
8-5-85		Mgr.		X				~~No Entry~~ orders issued		Shub
8-7-85			X					No Entry		Shub
8/15/85						X		1 extension Removed		Shub
8/29/85		- bartender				X		viol. 1,3,4,5 & 7 Remain		Shub
9/6/85		owner				X		viol 1-3+4 Remain		Shub
9-10-85			X					No entry		Shub
9-12		Barnard			X			no work done		Shub
~~9-19~~			X					Ticket ~~No Entry~~		Shub
~~9-24~~								~~No Entry~~		
~~9-27~~								tickets issued 9456 9457		Shub
10-1-			X							Shub
10-15			X							Shub
10/22			X							Shub
10/29			X							Shub
~~10/28~~										
10/30		Barnard				X		no work done tickets to Be Reissued		Shub
10/31										
11/19/85								Violations corrected	Y	

(1)

Fire Dept.
Fire Safety Division
Public Safety Bldg.
Rochester, N.Y. 14614

OFFICE OF THE
FIRE MARSHAL
TELEPHONE: 428-7037

NOTICE OF VIOLATIONS

Village Gate Sq.
274 N Goodman (Prop owner) 07

DATE 8/5/85

David ~~Cultrong~~ Cultrara (Bus owner) — Name

467 Park Ave. (07) — Address

Inspection of premises located at 302 N Goodman RT reveals violations of the Fire Prevention Code. Orders are hereby issued for correction of hazards listed herewith on or before: 8/12/85.

Failure to comply with these orders may result in issuance of Municipal Code Violation Ticket with following penalties:

	INITIAL	FAILURE TO RESPOND
1st OFFENSE	$ 50	$100
2nd OFFENSE	$100	$200
3rd & SUBSEQUENT	$250	$500

9 NYCRR

(1) (1163.11e) extension cords shall be removed from following locations: (1) Red extension cord over heat duct (touching heat duct.

(2) (2) In office extension cords running from light (3) 1-To run fan 1-To desk light (cords touching light Bulb) ok 8/15/85 RJ

(3) (3) extension cord over stage to operate spot lights, wrapped around pipes tucked + coiled behind stage. ok 11/19/85 RJ

(4) (1163.9c) flu pipe from water heater shall be repaired (seperated at collar top) ok 11/19/85

By Order of
FIRE MARSHAL

INSPECTOR [signature] 0546

DATE of COMPLIANCE 11/19/85

Inspector [signature]

FD506

Municipal Code Violation Summons

9456

City of Rochester

Last Name	First Name	Issued To
[illegible]	[illegible]	[illegible]

Street Address	Apartment
7 Park Ave	

City	State	Zip Code
[illegible]	NY	14607

You are hereby notified to appear personally at Rm. 230, 2nd floor, City Public Safety Bldg., 150 So. Plymouth Ave., Rochester, N.Y. on Oct 2, 19[illegible], at [illegible] ☐ a.m. ☐ p.m.

You are charged with [illegible]

a violation of Section 1163.9C of the Municipal Code

of the City of Rochester, N.Y., occurring at 302 [illegible]

on 9/17/85 at 10 ☐ a.m. ☒ p.m.

NOTE: Refer to Schedule ☐A ☐B ☒C ☐D on the reverse side of this summons for the applicable penalty for this violation.

NOT GUILTY PLEA: If you wish to plead NOT GUILTY to this violation you must appear at the time and date specified above and be heard before a hearing examiner.

GUILTY PLEA: If you wish to plead GUILTY to this violation you must pay the appropriate initial penalty on or before the appearance date indicated above, and in accordance with the directions provided on the reverse side of this summons.

NOTICE: Failure to respond to this summons will result in a default judgment being entered against you in the full amount of the appropriate penalty assigned for failure to respond.

NOTICE: **False statements made herein are punishable as a class A misdemeanor pursuant to Section 210.45 of the Penal Law of the State of New York.**

[illegible] 9/17/85 [illegible]

Signature of Issuing Authority | Date | I.D.

9456

No Show $100.00 fine

• PART 2-WARDEN/OFFICER COPY •

Municipal Code Violation Summons

9457

City of Rochester

Last Name	First Name	Issued To
[illegible]	[illegible]	[illegible]

Street Address	Apartment
457 Park Ave	

City	State	Zip Code
Roch	NY	14607

You are hereby notified to appear personally at Rm. 230, 2nd floor, City Public Safety Bldg., 150 So. Plymouth Ave., Rochester, N.Y. on Wed Oct 2, 19[illegible], at [illegible] ☐ a.m. ☐ p.m.

You are charged with [illegible]

a violation of Section 1163.9C of the Municipal Code

of the City of Rochester, N.Y., occurring at 302 [illegible]

on 9/17/85 at 10 ☐ a.m. ☒ p.m.

NOTE: Refer to Schedule ☐A ☐B ☒C ☐D on the reverse side of this summons for the applicable penalty for this violation.

NOT GUILTY PLEA: If you wish to plead NOT GUILTY to this violation you must appear at the time and date specified above and be heard before a hearing examiner.

GUILTY PLEA: If you wish to plead GUILTY to this violation you must pay the appropriate initial penalty on or before the appearance date indicated above, and in accordance with the directions provided on the reverse side of this summons.

NOTICE: Failure to respond to this summons will result in a default judgment being entered against you in the full amount of the appropriate penalty assigned for failure to respond.

NOTICE: **False statements made herein are punishable as a class A misdemeanor pursuant to Section 210.45 of the Penal Law of the State of New York.**

[illegible] 9/17/85 6546

Signature of Issuing Authority | Date | I.D.

$100.00 fine 9457 No Show

• PART 2-WARDEN/OFFICER COPY •

City of Rochester

Inter-Departmental Correspondence

To Sergeant Timothy Hill

From Captain James E. Glanton

Date November 8, 1985

Subject License Application for 302 North Goodman Street

Sir:

This office issued violations to Mr. David Cultrara of 302 North Goodman Street on August 5, 1985.

To date, Mr. Cultrara has refused to correct these violations. Therefore, I am requesting that his license be revoked and his machines sealed until he complies with the Code and corrects his violations.

Sincerely,

James E. Glanton

James E. Glanton
Captain, Fire Safety Division

JEG:jmk

rochester police department incident report

PAGE 1 OF 1

1. INCIDENT TYPE: Amusement Center Inspection

2. CLASSIFICATION (SUPERVISORY REVIEW): Sgt. T.W. Hill 11/14/85

3. CR #: 795206

4. TIME OF OCCURRENCE: M 11 D 13 Y 85 T 1400

5. WHEN REPORTED: same as 4

6. DISPATCHED TO:

7. LOCATION (HOUSE NO.-STREET NAME): 302 N. Goodman St.

SEC: 4

8. PERSONS INVOLVED: ENTER APPROPRIATE CODE FOR EACH AND USE NARRATIVE IF REQUIRED. WI: WITNESS #1; W2: WITNESS #2 R: REPORTING PERSON; PK: PERSONS WITH KNOWLEDGE INCLUDING REPORTING PERSONS NAME IF DIFFERENT FROM VICTIMS; N1: NOT INTERVIEWED

NAME	SEX-RACE-AGE	ADDRESS	RES. PHONE	BUS. PHONE

9. NATURE OF INJURIES

10. PERSON HOSPITALIZED/TREATED ☐ YES ☐ NO — WHERE

11. ATTENDING/PRONOUNCING PHYSICIAN

12. TIME PRONOUNCED M D Y T

13. NAME OF MEDICAL EXAMINER NOTIFIED

14. NARRATIVE: DESCRIBE THE DETAILS OF THE INCIDENT. LIST MISSING PERSON DESCRIPTION. USE APPROPRIATE NUMBER CODE TO EXPAND ON ABOVE INFORMATION.

On 11-8-85, RO received an Inter-Departmental correspondence from Capt. James E. Glanton of the Fire Safety Division, requesting that the game machines at Shnozz's Inc., 302 N. Goodman St. be sealed until the fire code violations were corrected.

On the above/date, RO's went to Shnozz's Inc., 302 N. Goodman, 271-2961 and spoke to owner-operator David Cultrara, 467 Park Ave., 271-2961, who was unable to produce an Amusement Center License. (establishment had an 84-85 A.C. License #398).

Observed on the premises was a Galaga cocktail table Lic. #1473, a Trivia Whiz porker video, Lic. 1472 and a Seeburg jukebox, Lic. 1471, #68, all of which were sealed with a nylon ty rap and red warning tag, pending the fire code violations being corrected, and obtainment of a valid 85-86 A.C. License.

Mr. Cultrara stated he didn't know his A.C. License expired and will make an application for an 85-86 license immediately. Vendor is Augie's Xxx Amusement.

On 11-14-85, 1200 hrs., Capt. Glanton was made aware the action taken.

15. TYPE OF TECH WORK PERFORMED: ☐ PHOTO ☐ FINGERPRINT ☐ OTHER - ☐ COMPOSITE ☐ FIELD SKETCH DIAGRAM

16. TECH WORK PERFORMED BY: -

CAR NO.: -

17. REPORTING OFFICER(S): Ferrari

ASSIGNED BEAT #: 371

18. ASSISTING UNITS/PERSONS: Ciufo 373

19. FOLLOW UP BY: ☐ TRAFFIC ☐ C.I.D. UNIT ☐ PATROL SEC. # ☐ FILE ☐ OTHER

20. SUPERVISOR APPROVING RANK: Sgt. T.W. Hill

4

FD570 FIRE SAFETY INSPECTION RECORD

500214

LOCATION: 302 N GOODMAN

☒ LICENSE ☐ TANK REMOVAL

GENERAL PUBLIC ED. PERMIT

DATE RECEIVED IN FIRE SAFETY: / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
2-14-85	1100	Chuck Stern							X	T Conroy

FD570 413707 FIRE SAFETY INSPECTION RECORD

LICENSE
☐ TANK REMOVAL

GENERAL
PUBLIC ED.
PERMIT

LOCATION: 302 N. GOODMAN ST Hilly's

DATE RECEIVED IN FIRE SAFETY: DEC 6 1984

DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
12/6/84								Goodman St Complex 274 N. Goodman St. 442 4168 Rubin & Rossi Ltd 271 8820	K	[illegible]

FD570

FIRE SAFETY INSPECTION RECORD

40[illegible]73

☐ LICENSE
☐ TANK REMOVAL

GENERAL PUBLIC ED. PERMIT ☐

LOCATION: 302 North Goodman Street Schnozz,s

DATE RECEIVED IN FIRE SAFETY: 4-2-84 / DATE	APPOINTMENT	PERSON CONTACTED	NO ENTRY	ORDERS ISSUED	REFERRALS ISSUED	NO WORK DONE	SOME WORK DONE	OTHER	OK TO FILE	INSPECTOR
4-4-84		George Owen						Remodeling, Roofing 4-12-84		Steger
4-12-84									X	Steger