CITY OF PHILADELPHIA

DEPARTMENT OF LICENSES & INSPECTIONS

Municipal Services Building 1401 John F. Kennedy Boulevard Philadelphia, PA 19102

Complete all sections; type or neatly print:

Summary Inspection Report of Exterior Walls and Appurtenances

(Philadelphia Code, Title 4, Section PM-304.10) THIS FORM TO BE SUBMITTED TO: facadereports@phila.gov

1 Filing Information	
Date of Report: 10/19/2021	Amended Filing Date:
2 Location Information - Must use the address assigned by the City's Board of Revision of Taxes	
Building Address: 3700 Gateway Drive, Philadelphia, PA 19103	
Owner/Agent/Site Contact: Brian M. Kroker	Phone Number: <u>267-300-6773</u>
3 Building Characteristics	
Principal Occupancy: Residential, Group 2 Number of Stories: 6 Height: +/- 55 feet Year Constructed: 1985 Exterior Wall Type: Masonry Historic Designation (if any): N/A	
4 Inspection Status Information	
Wall(s) Inspected: All exposed exterior Inspection N	Method: Binocular and Inspection Date: 9/7-8/2021 hands-on via aerial lift
SAFE WITH REPAIR & MAINTENANCE PROGRA	AM Recommended start date: December 2021
UNSAFE / IMMINENT DANGER Submit copy of full report along with form	
NOTE: The Department of Licenses & Inspections' Emergency Services & Abatement Unit must be notified by phone (215-686-2480) within 12 hours of discovery, and a report containing details of the condition and recommended temporary safety measures must be delivered within 24 hours to that unit at the address above. Person Contacted: N/A Date Contacted: N/A	
Description (probable cause of condition; nature/extent of co	
5 Professional Responsible for Inspection	
Name: Jason Coleman Company:	WJELicense #: PE 078128
Company Address: 601 Walnut Street, Suite 875W, Philadelphia, PA 19106	
Company Phone/Fax/E-mail: 215-567-0703/jcoleman@wje.com	
6 Owner of Record Information (NOT Agent, Site Contact, or Business Manager)	
Name: Brian M. Kroker	Company: Lindy Property Management Co.
Address: 309 York Road, Suite 211 Jenkintown, Pennsylvania 19046	
Company Phone/Fax/E-mail: 267-300-6773	
7 Signature Statements	
FOR OWNER / OWNER REPRESENTATIVE:	FOR PROFESSIONAL:
I hereby state that I am the owner/owner's representative of the premises referenced in the inspection report. Furthermore, I have received and read a copy of the report and am aware of the required repairs and/or maintenance, if any, and the recommended time frame for same. I certify that all items noted for action in the previous cycle's report have been corrected/repaired.	I hereby state that the owner/owner's representative has authorized me to submit this report. Furthermore, I hereby state that all reporting and inspection requirements have been met and that all statements are correct and complete to the best of my knowledge. A serve of this report has been given to the owner/owner's re
NAME: Brian M. Kroker	JASON ANDREW COLEMAN BYGINEER No. PESTS128 Typi
CICNATURE.	SIGNATURE:()

disponibles. | 동역이 제공됩니다|Предоставляются услуги устного переводчика |Se brindan servicios de interpretación. |Со sẫn dịch vụ thông dịch.

SIGNATURE: