



Notice of Appeal

This form is used to file an appeal of an order, notice, decision, determination, or ruling by the Allegheny County Health Department. Please complete this form (use additional pages as necessary). If more than one person or entity is filing this appeal, please attach a separate form for each additional appellant. **A copy of the order, notice, decision, determination, or ruling must be attached to the Notice of Appeal.**

Name Augusto Sciallo

Mailing Address 140 S. Fairmont St., Apt. 1

City Pittsburgh State PA Zip 15206 Email jplakosh@hotmail.com

Phone 412-361-5218 Fax (optional) _____

If you are represented by an attorney, please provide contact information for your attorney:

Name Jason M. Plakosh, Esq.

Mailing Address P.O. Box 184

City Sewickley State PA Zip 15143 Email jplakosh@hotmail.com

Phone 412-445-2945 Fax (optional) _____

Describe your objections to the Department's actions and a statement describing the relief you want the Hearing Officer to grant. (The objections may be factual or legal and must be specific. If you fail to state an objection here, you may be barred from raising it later in your appeal. Use additional pages if necessary.)

The tenant has filed legal action against the owners and will not leave the property. The property must be temporarily vacant in order to enable the owners to effectuate the necessary repairs/corrections. The owners cannot communicate or otherwise interact with the tenant, excepting collection of the rent.

By filing this Notice of Appeal with the Allegheny County Health Department, I hereby certify that the information submitted is true and correct to the best of my information and belief.

Signature Augusto Sciallo Date 1-20-2020

Appeals should be submitted in person or by mail to:

**Allegheny County Health Department
Attention: Hearing Officer
542 4th Avenue
Pittsburgh, PA 15219**

RECEIVED

JAN 30 2020

**LEGAL SECTION
Allegheny County
Health Department**

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

January 2, 2020

Mr. Michael Rosato
140 S Fairmount Street
Pittsburgh PA 15206 - 3585

RE : SR# HCE-20190701-3913

Property 4913 SCIOTA STREET
Address : Pittsburgh, PA 15224
Census Tract : 30804

Dear Mr. Rosato:

Pursuant to our letter dated 09/30/2019 this shall serve as notice that a civil penalty in the amount of \$2,500.00 was levied against you by virtue of the authority vested in the Director of the Allegheny County Health Department conferred by the Law of the Commonwealth of Pennsylvania. Said penalty shall be paid in the form of a cashier's check, certified check, or money order made payable to the "Environmental Health Fund."

This sum is to be paid within 30 days of the date of this letter to:

Allegheny County Health Department, c/o David Namey, HCE Program Manager
3190 Sassafras Way
Pittsburgh, Pennsylvania 15201

This penalty has been levied as a RESULT OF YOUR FAILURE TO TAKE ACTION specified in the letter dated 09/30/2019. Furthermore, it is hereby ordered that you shall abate the above situation within 35 days from the date of this order. In the event that the condition(s) cited in the letter dated 09/30/2019 is not abated within 35 days from the date of this order, you are hereby notified that a civil penalty in the amount of \$250.00 may be levied for each day of continued violations and other enforcement actions may be taken.

Pursuant to Article XI entitled "Hearings and Appeals," you are hereby notified that you have thirty (30) days after issuance of this written notice to file an appeal. The appeal shall be made in writing and must set forth with particularity all issues to be raised. The notice of appeal shall be submitted to the Allegheny County Health Department, Office of the Director, 542 4th Ave, Pittsburgh, Pennsylvania 15219. In the event that an appeal is not filed within thirty (30) days after issuance of this written notice, the within action shall become final.

Sincerely,

Lori Horowitz
Operations Manager
Housing & Community Environment Program
LIH:Sb
Enclosure

cc: Occupant
Michael Parker, Esquire
Jim Kelly, Deputy Director, Environmental Health
Ronald Sugar, Acting Director



ALLEGHENY COUNTY HEALTH DEPARTMENT
HOUSING & COMMUNITY ENVIRONMENT PROGRAM
3190 SASSAFRAS WAY (NEAR 32ND ST. AT LIBERTY AVE.)
PITTSBURGH, PA 15201-1443

PHONE: 412.350.4046 • FAX: 412.350.2792 • WWW.ACHD.NET



Advancing
public health
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Allegheny County Health Department

Inspection Report - Complaint Housing

SR#: HCE-20190701-3913

Owner Violations

Property Address : **4913 Sciota Street , Pittsburgh 15224**

Inspection # 3 Census Tract : 30804 Property Type : (Single-Family Units)

Inspector : Issa Tijani Inspection Date : November 26, 2019 Time : 14:30

Contacts:

Mr. AUGUSTO SCIULLO Owner
140 S Fairmount Street Apt 1
Pittsburgh , PA 15206

Mr. MICHAEL ROSATO Owner
140 S Fairmount Street Apt 1
Pittsburgh , PA 15206

(412) 860-0092

Mr. DUANE JONES Occupant
4913 Sciota Street
Pittsburgh , PA 15224

(412) 320-5093

Listed below are the Article 6 violations that require corrective action :

1st Floor

Kitchen

Section 622 032 (O)(D)

Class 4

Location : Ceiling

Violation Status : **Remains**

Violation : Hole(s) in ceiling.

Remedy : Repair.

Comments : KITCHEN CEILING. TO THE LEFT OF THE SINK. HOLE IN CEILING. REPAIR.

1st Floor

Stairway

Section 623 012 (O)(D)

Class 3

Location : Wall

Violation Status : **Remains**

Violation : Stairs of three or more steps lack handrail.

Remedy : Provide handrail for safety.

Comments : STAIRWAY LEADING TO SECOND FLOOR LACKS A HANDRAIL. PROVIDE.

Property Address : **4913 Sciota Street , Pittsburgh 15224**

Inspection # 3 Census Tract : 30804 Property Type : (Single-Family Units)

Inspector : Issa Tijani Inspection Date : November 26, 2019 Time : 14:30

2nd Floor

Bedroom

Section 628 A 029 (O)(D)

Class 4

Location : None

Violation Status : **Remains**

Violation : Overuse of extension cord(s) [owner responsibility].

Remedy : Eliminate. Provide adequate number of properly wired outlets.

Comments : FIRST BEDROOM TO THE RIGHT ON THE SECOND FLOOR. OVERUSE OF EXTENSION CORDS. PROVIDE AN ADEQUATE NUMBER OF PROPERLY WIRED OUTLETS.

----- END OF REPORT -----

All Violations Verified by the Inspector :


