



Rent Stabilization Program

(650) 903-6149 | mvrent@mountainview.gov
Mountainview.gov/rentstabilization

COMMUNITY STABILIZATION AND FAIR RENT ACT (CSFRA) REQUEST FOR APPEAL OF PETITION HEARING DECISION

Communications and submissions during the COVID-19 Pandemic: To the extent practicable, all communications, submissions and notices shall be sent via email or other electronic means.

Any Party to a petition may appeal the Decision by *-serving a written Request for Appeal on all applicable parties and then filing a copy of the completed form with the City within ten (10) calendar days* after the mailing of the Petition Decision. If no Appeals are filed within ten (10) calendar days, the decision will be considered final.

I hereby Appeal the Hearing Officer's Decision for the following Petition to the Rental Housing Committee:

Petition Case Number: C22230037
Name of Hearing Officer: Duf Sundheim Decision Date: 1/26/2024

For the following Property Address, including Unit Number(s), if applicable:
1725 Wright Avenue #53
(Street Number) (Street Name) (Unit Number)

Person Appealing the Hearing Officer Decision (if more than one person is appealing the petition decision, attach their contact information as applicable):

Name: Shirley Ankenbauer Phone: [Redacted]
Mailing Address: [Redacted] Email: [Redacted]

I am: A tenant affected by this petition. A landlord affected by this petition.

Reason for Appeal:

Please use the space below to clearly identify what issue and part of the Decision is the subject of the appeal (include section headings and subheadings, as necessary). Thoroughly explain the grounds for the appeal. For each issue you are appealing, provide the legal basis why the Rental Housing Committee should affirm, modify, reverse, or remand the Hearing Officer's Decision. (continue on the next page; add additional pages if needed)

V.1 It is stated that in the absence of a specific City minimum degree figure, the International Code 505.4 will be the standard to be applied in this case. Further recourse and time frame is needed to compare OSHA, California code and EPA's

Filing Instructions:

Once you have completed this form and attached all relevant documents, **serve all parties with complete copies** before formally filing the Appeal with the City. Once served, please file a copy of the completed form with the City of Mountain View via email (preferred method) to patricia.black@mountainview.gov or by mailing to 500 Castro Street, Mountain View, CA 94041.

Declaration:

I (we) declare under penalty of perjury under the laws of the State of California that the foregoing and all attached pages, including documentation, are true correct, and complete.

Signature: Shirley Ankenbauer Date: 2/8/2024
Print Name: Shirley Ankenbauer

Este formulario está disponible en inglés y español. | 此表格有英文和中文版本

DISCLAIMER: Neither the Rental Housing Committee nor the City of Mountain View make any claims regarding the adequacy, validity, or legality of this document under State or Federal law. This document is not intended to provide legal advice. Please visit mountainview.gov/rentstabilization or call 650-903-6136 for further information.

Reason for Appeal (Continued)

requirements for the state of California or local Cities. International seems to be such a wide spread standard.

V. II Analysis 2 The landlord has shown accountability and has taken the incentive and expense to fix the problem to the best of her ability with this spacious and older complex. Vendors brought in to evaluate and make repairs and upgrades within reason has been done.

VI. Decision 4 Adjustments in Rent Credit Percentages. Rent amount is incorrect!

Proof of Service of Request for Appeal of Petition Hearing Decision

I declare that I am over eighteen years of age, and that I served one copy of the attached Appeal of Petition Hearing Decision after Remand on the affected party(ies) listed below by:



Personal Service

Delivering the documents in person on the 9 day of Feb, 2024, at the address(es) or location(s) above to the following individual(s).



Mail

Placing the documents, enclosed in a sealed envelope with First-Class Postage fully paid, into a U.S. Postal Service Mailbox on the ___ day of _____, 20___, addressed as follows to the following individual(s).



Email

Emailing the documents on the ___ day of _____, 20___, at the email address(es) as follows to the following individual(s).

Respondents

INSERT RESPONDENT NAME

INSERT RESPONDENT ADDRESS

INSERT RESPONDENT EMAIL

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct:

Executed on this 9 day of Feb, 2024

Signature:

Shirley Ankenbauer

Print Name:

Shirley Ankenbauer

Address:

1725 Wright Ave, Mt. V. Ca., 94043

 <https://codes.findlaw.com/hsc-sect...>

California Code, Health and Safety
Code - HSC § 114192 | FindLaw

V. Findings

MORE RESULTS

What is the hot water
temperature code in California? ^

(d) Hot water temperature controls shall be maintained to automatically regulate temperature of hot water delivered to plumbing fixtures used by patients to attain a hot water temperature not less than 40.5 degrees C (105 degrees F) and not more than 48.9 degrees C (120 degrees F).

 <https://www.law.cornell.edu/22-C...>

AA  Q State of California 



Temperature

(2)

EPA 120° - OSHA 140°

To avoid bacterial build-up in hot water tanks or heaters

lack of hot + cold running water to plumbing fixtures in dwelling unit. N/A

OSHA



JKEsq

Verified attorney

I see that you have come to us today regarding hot water.

I'm sorry to hear about your issues. there isn't such a specific legal requirement for a minimum hot water temperature in California. The only statutes which somewhat cover this are California Civil Code 1941.1 and Health and Safety Code section 17920.3; both generally requiring hot water "without any specific temperature."

← a system that is under the control of the landlord, that produces hot + cold running water furnished to appropriate fixtures + connected to sewage system approved under law

It would be up to local code if a minimum temperature is required. But from everything I have seen those are more in the 110-120 degree range. 125 would be well more than required by any other law I have seen out there.

It sounds like an excuse frankly. And without a set amount tenant does not have a case to break a



Welcome! How can I help with your legal question?

City/county code. Unfortunately, this is only a general information question and answer site. We

AA justanswer.com

1 be provided with hot and cold running water, except water closets shall be provided with cold
2 water only.

3 (2) All plumbing fixtures shall be of an approved nonabsorbent material. No timers
4 or devices, other than water conservation fixtures required by Chapters 12 and 12A of this Code, shall
5 be permitted to restrict or interrupt the water flow from showerheads installed in any dwellings,
6 apartment houses, dormitories, lodging houses, and hotels, as defined in this Code; provided, however,
7 that the prohibition set forth in section 505(d)(2) shall not apply to owner-occupied dwelling units.

BOARD OF SUPERVISORS
MEMORANDUM
STATES

8 * (3) For the purposes of this Section, water heated to a minimum temperature of
9 105 degrees Fahrenheit (41 degrees Centigrade) and a maximum of 120 degrees Fahrenheit
10 (49 degrees Centigrade) at the tap shall be furnished to hotels and apartment houses.

11 (4) Each building shall provide four gallons of hot water storage capacity per guest
12 room and eight gallons of hot water storage capacity per dwelling unit.

13 (5) Shower heads with no more than a three-gallon-per-minute flow shall be
14 required. Showerheads of the ball-joint type that cannot easily be removed from the wall
15 without structural alteration are exempt from this requirement.

16 * * * *

17
18 Section 4. Effective Date. This ordinance shall become effective 30 days after
19 enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the
20 ordinance unsigned or does not sign the ordinance within ten days of receiving it, or the Board
21 of Supervisors overrides the Mayor's veto of the ordinance.

22
23 Section 5. Scope of Ordinance. In enacting this ordinance, the Board of Supervisors
24 intends to amend only those words, phrases, paragraphs, subsections, sections, articles,
25 numbers, punctuation marks, charts, diagrams, or any other constituent parts of the Municipal



V.11. 2
Analysis
Accountability

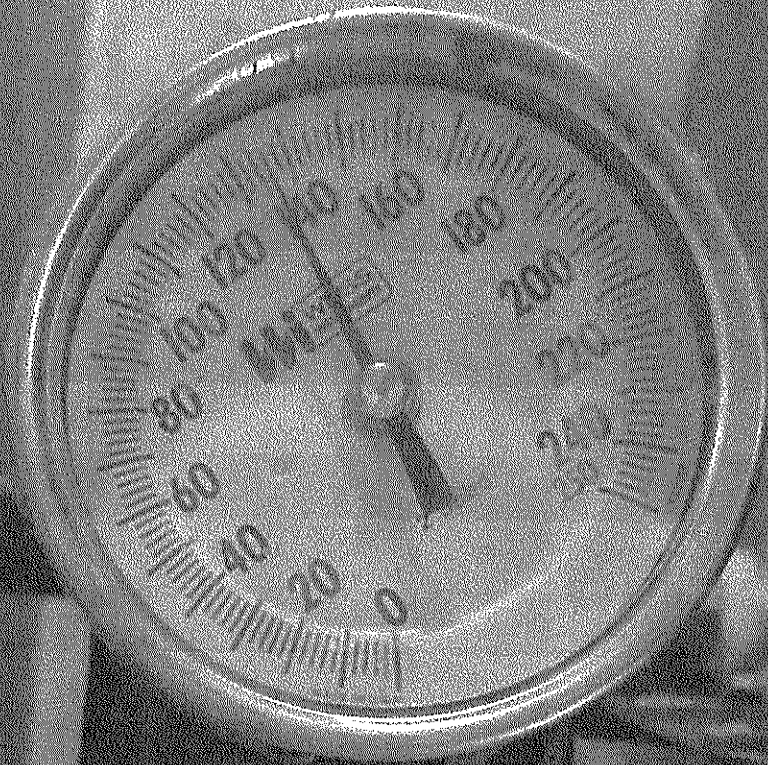
Bay City Boiler

Email: [REDACTED]

SOLD TO VILLA DE WRIGHT APTS [REDACTED]	INVOICE Invoice Number: [REDACTED] Invoice Date: Dec 31/22 Terms: 30D Customer Order #: ER CALL Work Order #: [REDACTED]
JOB LOCATION VILLA DE WRIGHT APTS. 1725 WRIGHT AVE MOUNTAIN VIEW, CA	Customer Code: [REDACTED] Serial Nbr: [REDACTED] Model: Manufacturer:

Description	Qty	Price	Total
Work Performed			
PER CUSTOMER 1 BOILER BURNERS ARE NOT COMING ON - SOME UNITS ARE NOT GETTING HOT WATER RAYPACK BOILER			
[REDACTED] 12/22/2022			
Arrive job site, call POC, access laundry/boiler room. Found boiler #1 firing, boiler #2 showing a call for heat but not firing. Isolate boiler #2 and open front panel. Found air filter dirty. Found hot surface igniter showing high resistance. Found flame rod dirty. Remove burners, clean and inspect. Found all eight burners showing wear and corrosion. Vacuuming combustion chamber, and inspect heat exchanger coils. Replace hot surface igniter from truck stock. Clean flame rod. Replace air filter with customer supplied new one. POC points out corrosion on exhaust stack. Found exhaust stack outlet uncovered and corroded. Recommend replace burner. Recommended replace exhaust stack. Recommend schedule annual service. POC states stack repair will be performed by on site maintenance. Both boilers online and firing. Domestic hot water storage tank shows 135 degrees F. Boiler circulating pumps show normal operation. Clean up and check out with POC.			
Materials			
Total Material			0.00
Labor			
SERVICE TECH			
Total Labor	4.00	210.00	840.00
Equipment			
Service Truck			
Total Equipment	1.00	220.00	220.00
Travel			
Total Travel			0.00
Other			
Total Other			0.00
- CONDITIONS -			
	Subtotal		1,060.00

V. II. 2
Analysis



**Inspection, Testing, and Maintenance Cover Sheet
NFPA25 as amended by CCR, Title 19**

Property Information:

Name:	Villa De Wright	Occupancy/Use:	R2
Address:	1725 Wright Avenue	Construction Type:	
City:	Mountain View	No. Stories:	2
ZIP:	94043	Year Constructed:	1979
Contact:	[REDACTED]		
Telephone:	[REDACTED]		



Contractor Information:

Number of System Risers

Name: LUND PEARSON McLAUGHLIN
 Address: [REDACTED]
 City: [REDACTED]
 State: [REDACTED]
 Telephone: [REDACTED]
 CA License#: [REDACTED]
 Job #: [REDACTED]
 Performed by: [REDACTED]

Copy sent to:

Owner Date: 03/01/23
 Fire AHJ Date: _____
 Contractor Date: _____

NOTES:
 1) For specific inspection, testing, and maintenance requirements and information, see NFPA 25, 2011 Edition as amended by California Code of Regulations, Title 19, §901 to §906.
 2) Inspection items may be performed by the owner in accordance with California Code of Regulations, Title 19, §904.1(a)

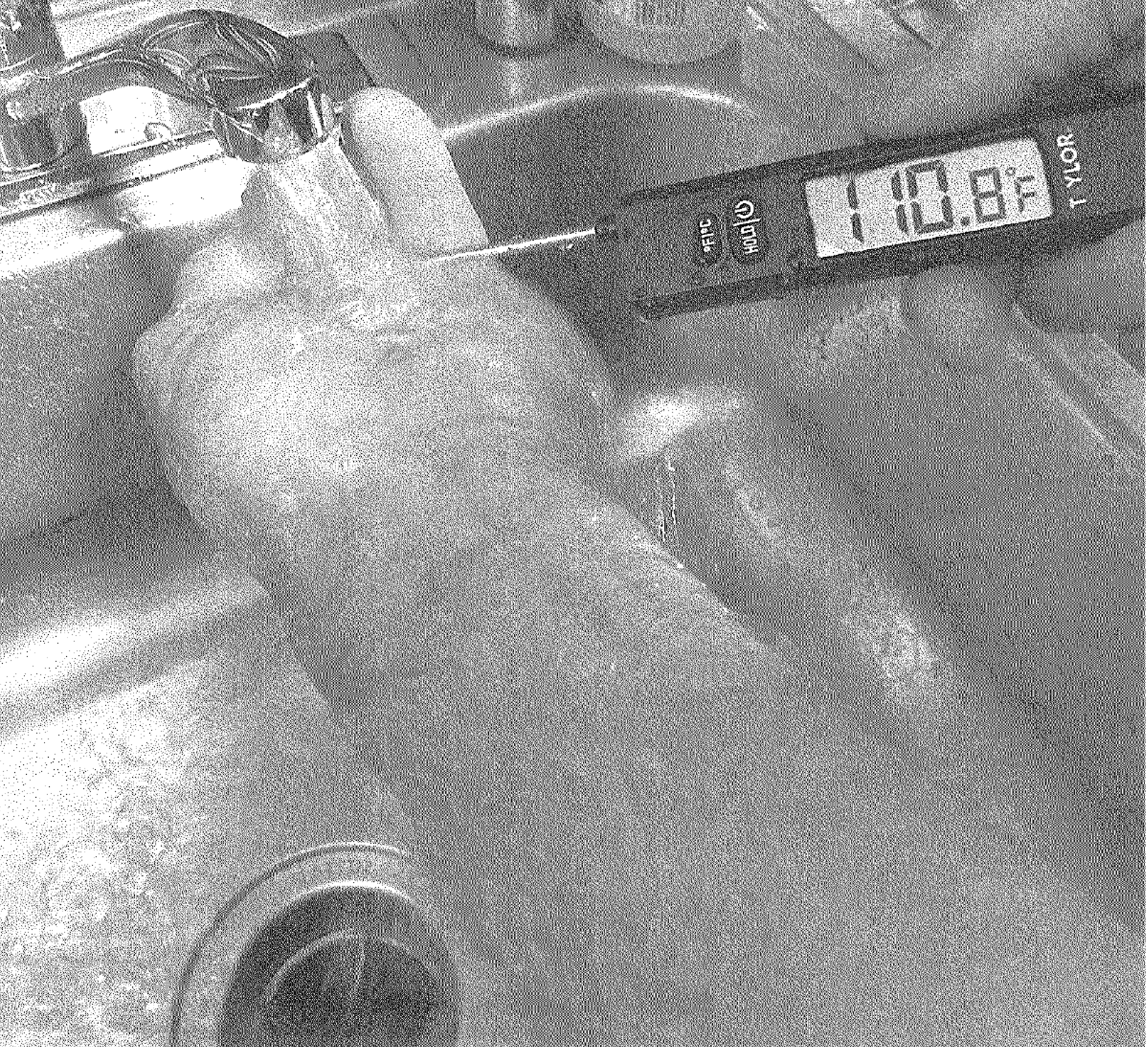
Check box for each system inspected and enter the number of forms used for inspection.
 Check boxes (Fail or Pass) to indicate status of inspected system at end of inspection.

Forms Included with this Report	NFPA 25 Chapter	Number of Forms	N/A	Fail*	Pass
<input type="checkbox"/> Automatic Sprinkler System	5	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Standpipe and Hose System	6	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Private Water Supply System	7	1	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Fire Pump	8	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Water Storage Tank	9	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Water Spray System	10	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Foam Water Sprinkler System	11	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Water Mist System	12	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Concerns that are not deficiencies (i.e. Non-Sprinklered Areas)				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

*See "Deficiencies and Comments" section at end of each respective form.

taken: 9-24-2023
@ approx 6pm
by: [REDACTED]
Kitchen Sink

V. 11.2
Analysis:
Accountability



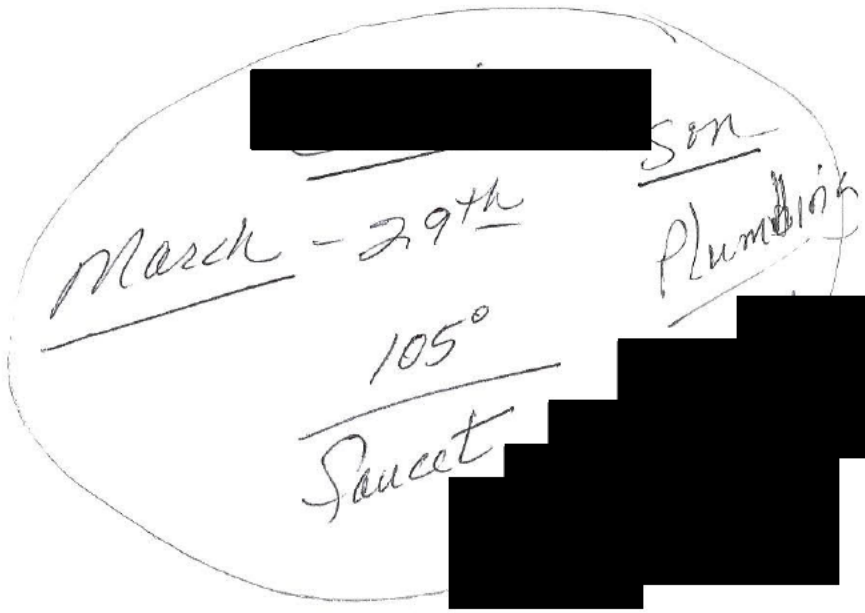
March - 7th

V.11.2
Analysis
Accountability

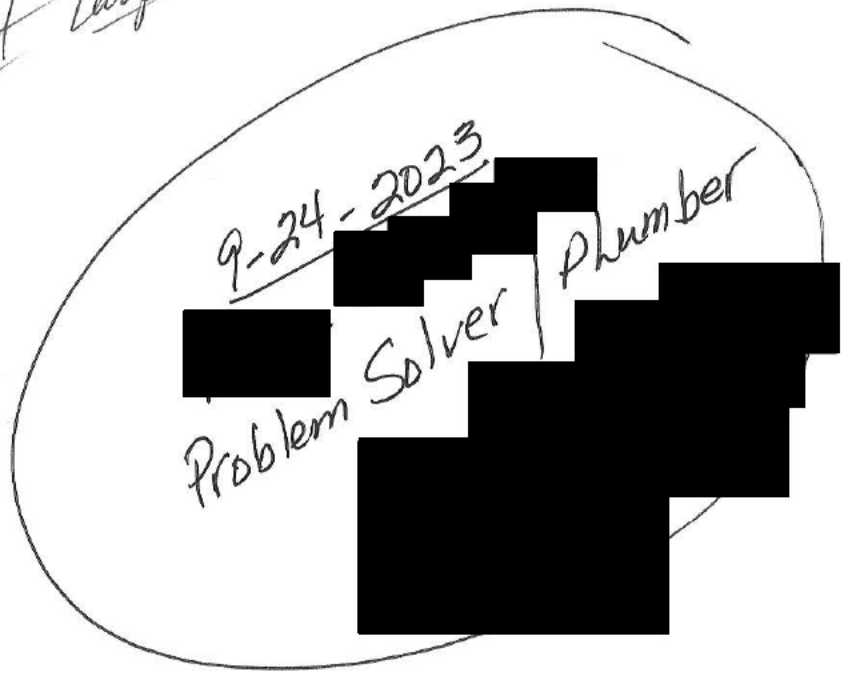


[Redacted]

Chanda



Hot Tap



State legislature

V1-4.1

RESIDENTIAL LEASE/RENTAL AGREEMENT

DATED 5/7/22

A. VARIABLE LEASE TERMS:

RESIDENCE DESCRIPTION: <input type="checkbox"/> (If checked) A single family residence <input checked="" type="checkbox"/> (If checked) Part of a multi-family residential complex known as																	
UNIT NUMBER: [REDACTED]	UNIT TYPE: APT	UNIT ADDRESS: 1725 Wright Avenue															
COUNTY: Santa Clara	CITY: Mountain View	California	94043														
TERM: 1 Year Lease																	
COMMENCEMENT DATE: 6/1/22		***TENANT MUST GIVE 30-DAY NOTICE TO MOVE.		<input checked="" type="checkbox"/> (If checked) After the Termination Date, this Agreement will continue on a month-to-month basis until terminated as specified elsewhere in this Agreement.													
TERMINATION DATE: 5/31/23																	
RESIDENT(S):																	
NAME: Eric Walker		NAME:		NAME:													
NAME:		NAME:		NAME:													
LIST OF ALL OCCUPANTS (Do not list any Residents from above):																	
NAME:		NAME:															
NAME:		NAME:															
GUARANTOR(S) [REDACTED]																	
LANDLORD NAME: Timpson Enterprises, Inc.																	
PROPERTY MANAGER [REDACTED] - 1725 WRIGHT AVE APT 1 (LEASING OFFICE) MOUNTAIN VIEW, CA 94043 - [REDACTED]																	
MONTHLY RENT: \$2200.00																	
Base Rent: \$2200	<input type="checkbox"/> (If checked) LICENSE FOR GARAGE/PARKING SPACE NO.: Monthly Garage/Parking Rent: \$	<input type="checkbox"/> (If checked) LICENSE FOR STORAGE SPACE NO.: Monthly Storage Space Rent: \$	<input type="checkbox"/> (If checked) Monthly Appliance Rent: \$	<input type="checkbox"/> (If checked) Monthly Pet Rent: \$	<input type="checkbox"/> (If checked) Other monthly charge describe: \$	Total Monthly Rent \$2200											
<input type="checkbox"/> (If checked) RENT CONCESSIONS The monthly Base Rent identified above is the amount due before application of the rent concession																	
LATE CHARGE (Applied if payments have not been received within 2 days of the 1 st of each month): 6% of overdue amount				SECURITY DEPOSIT: 600.00													
PAYMENT INSTRUCTIONS:																	
<input checked="" type="checkbox"/> All amounts due Landlord are payable to Villa de Wright Apartments, 1725 Wright Ave #1, Mtn. View, CA 94043 Payment must be made by: <input checked="" type="checkbox"/> Money Order <input checked="" type="checkbox"/> Cashiers Check <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check. The normal hours available to make payments in person are from 10am to 6pm, on all non-holiday <input checked="" type="checkbox"/> Tuesday-Saturday 10am to 6pm. <input checked="" type="checkbox"/> (If checked) A twenty-four hour, seven days a week rent payment drop box is available at the address above. (Apartment #1, in slot on front door)			<input type="checkbox"/> (If checked) All amounts due Landlord must be deposited by Resident in Landlord's account at <i>(name and street address of the financial institution within five miles of the Residence)</i> , Account No.		<input type="checkbox"/> (If checked) Landlord may, but is not required, to accept payments electronically or by credit card, either directly or through a third party payment service system. Residents interested in these payment methods should request information about Landlord's current electronic and credit card payment acceptance policy from the management office. See the Payment Detail section below.												
MISCELLANEOUS INFORMATION:																	
PETS: <input checked="" type="checkbox"/> are not authorized. <input type="checkbox"/> (If checked) The following pets are authorized: <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Pet Name</th> <th>Type</th> <th>Description</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			Pet Name	Type	Description										<input type="checkbox"/> (If checked) ATTORNEY'S FEE CAP: \$		LANDSCAPE WATERING by: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Resident
Pet Name	Type	Description															
ACCESS CONTROL DEVICES: Mailbox No. 53 I Keys to mail facilities. Rekeyed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No I Key(s) to the Residence Rekeyed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No PARKING SPACE # 42			HOMEOWNERS ASSOCIATION: <input type="checkbox"/> (If checked) The Residence is a unit in a development governed by a homeowner's association. Name of HOA: <input type="checkbox"/> (If checked) Copies of HOA rules and regulations are available for Resident's review at <input type="checkbox"/> (If checked) Copies of HOA rules and regulations have been provided to Resident.														

Kimball, Tiry & St. John California Residential Lease/Rental Agreement
 © 2003-2015 Kimball, Tiry & St. John LLP. All rights reserved.
 This lease may not be duplicated in any way without the express written consent of Kimball, Tiry & St. John LLP.
 Licensed for use on properties owned or managed by Timpson Enterprises, Inc.

Landlord's Initials BT



Resident's Initials EW