



**SAINT PAUL**  
SAFETY & INSPECTIONS

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)  
ANGIE WIESE, PE(MN), CBO, DIRECTOR

375 Jackson Street, Suite 220  
Saint Paul, MN 55101-1806  
Tel: 651-266-8989 | Fax: 651-266-9124

July 19, 2022

Mark A Reese/Alexandra Reese  
1194 Hewitt Ave  
St Paul MN 55104-1454

Mark A Reese/Alexandra K Reese  
1194 Hewitt Ave  
St Paul MN 55104-1454

Mark A Reese  
1194 Hewitt Ave  
St Paul MN 55104-1454

Dear Mark A Reese/Alexandra Reese and others, if listed:

On July 19, 2022, this department conducted an inspection of your property at **1194 HEWITT AVE** and because **you were not compliant with a previous order.**

**Deficiency: "Exterior - ( Includes all except 6,7,8,9 & 11)"**

**YOU ARE BEING BILLED \$124.00** for the cost of this inspection. This is in accordance with Chapter 34.24 of the Saint Paul Legislative Code. Payment is due upon receipt of this letter. Make your check payable to the "City of Saint Paul" and mail your payment to:

Department of Safety and Inspections, Code Enforcement  
Excessive Consumption Unit  
375 Jackson Street, Suite 220  
St. Paul, MN 55101-1806

**If you do not pay within 30 days, the amount of this bill, plus administrative costs, will be assessed to your property taxes.**

### **NOTICE**

Your property is scheduled for a REINSPECTION on **July 26, 2022.**

### **\*\*WARNING\*\***

**IF YOU DO NOT HAVE THE VIOLATION(S) CORRECTED BY THE NEXT INSPECTION DATE, July 26, 2022, YOU WILL BE BILLED AN ADDITIONAL \$124.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Andrew McCullough, 651-266-9066**

Andrew McCullough  
Code Enforcement Inspector

**City of Saint Paul, Department of Department of Safety and Inspections**

July 19, 2022

**EXCESSIVE CONSUMPTION**

Invoice #: 1670855

File #: 22-072282

Property Address: 1194 HEWITT AVE

Property PIN: 272923440058

Owner Name: Mark A Reese/Alexandra Reese

**Fee Description**

**Amount**

Excessive Consumption (Non Compliance)

\$ 124.00

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Send payment to: Department of Safety and Inspections  
Excessive Consumption Unit  
375 Jackson Street, Suite 220  
St. Paul, MN 55101-1806

Keep this portion for your records:

Date Paid: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Check or Money Order #: \_\_\_\_\_

---[ ]---[ ]---[ ]---[ ]---**CUT HERE**---[ ]---[ ]---[ ]---[ ]---

**\*\*\*RETURN THIS PORTION WITH YOUR PAYMENT\*\*\***

**City of Saint Paul, Department of Department of Safety and Inspections, Code Enforcement Division**

**EXCESSIVE CONSUMPTION PAYMENT**

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