



Fire Certificate of Occupancy Fee Invoice

**** FINAL NOTICE ****

Check this box if making any name or mailing address corrections.

CITY OF SAINT PAUL
Department of Safety and Inspections
375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
PHONE: (651) 266-8989
FAX: (651) 266-9124
An Equal Opportunity Employer

JOHN A DREELAN LOIS DREELAN
2182 MITCHELL AVE
ST PAUL MN 55119-4630

Bill Date: August 4, 2010
Customer #: 938547

Amount Due: \$170.00
Due Date: August 19, 2010

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. ****
Payment must be received in this office no later than August 19, 2010 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
1673 IGLEHART AVE

Ref. # 101829
Folder RSN: 1391213

Date	Type of Fee	Amount
June 2, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00

PAY THIS AMOUNT: \$170.00

Mail to: Billing
375 Jackson St, Suite 220
Saint Paul Fire Inspection
Saint Paul, MN 55102-1806

Make Checks Payable to: City of St. Paul
**** Return this document with your payment ****

Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$170.00

Customer #: 938547 Ref. #: 101829 Folder RSN : 1391213

<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	Expiration Date: Month / Year				
Enter Account Number								