



# 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

Zhi Kai Yu  
 699 Virginia St  
 St Paul MN 55103-1751

Bill Date: March 7, 2011  
 Customer #: 1185565  
 Amount Due: \$400.00  
 Due Date: March 22, 2011

**\*\* You were sent a Fire Inspection Fee Invoice and payment has not been received. \*\***  
**Payment must be received in this office no later than March 22, 2011 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.**

**Property Address:**  
**470 EDMUND AVE**

**Ref. # 101636**  
**Folder RSN: 2142599**

Date	Type of Fee	Amount
August 24, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00
October 27, 2010	CO Residential 1&2 Unit Reinspection Fee	\$85.00
November 5, 2010	CO Residential 1&2 Units No Entry Penalty Fee	\$60.00
February 3, 2011	CO Residential 1&2 Unit Reinspection Fee	\$85.00

**PAY THIS AMOUNT: \$400.00**

**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: \$400.00**

**Customer #: 1185565      Ref. #: 101636      Folder RSN : 2142599**

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