



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

DON P NOVAK PEGGY SUE NOVAK
PO BOX 452
Chisago City MN 55013-0452

Bill Date: January 3, 2014
Customer #: 1074554
Amount Due: \$290.00
Due Date: January 18, 2014

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. ****
Payment must be received in this office no later than January 18, 2014 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
65 GARFIELD ST

Ref. # 109722
Folder RSN: 1724813

Date	Type of Fee	Amount
September 20, 2013	CO Residential 1 & 2 Units Initial Fee	\$170.00
September 20, 2013	CO Residential 1&2 Units No Entry Penalty Fee	\$60.00
October 29, 2013	CO Residential 1&2 Units No Entry Penalty Fee	\$60.00

PAY THIS AMOUNT: \$290.00



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: \$290.00

Customer #: 1074554 Ref. #: 109722 Folder RSN : 1724813

<input type="checkbox"/> Amex	<input type="checkbox"/> MasterCard			Expiration Date: Month / Year					
<input type="checkbox"/> Discover	<input type="checkbox"/> Visa	4 Digit Verification Number	3 Digit Verification Number						
Enter Account Number		Security Code:							