



**Fire Certificate of Occupancy
Fee Invoice**

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

**** FINAL NOTICE ****

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

CALVIN K BURTON
362 RUTHIE LN
HUDSON WI 54016- 8132

Bill Date: December 7, 2015
Customer #: 981698

Amount Due: \$336.00
Due Date: December 22, 2015

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. **
Payment must be received in this office no later than December 22, 2015 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.**

**Property Address:
899 JENKS AVE**

**Ref.# 114125
Folder RSN: 3988488**

| Date | Type of Fee | Amount |
|--------------------|---|----------|
| September 23, 2015 | CO Residential 1 & 2 Units Initial Fee | \$196.00 |
| September 23, 2015 | CO Residential 1&2 Units No Entry Penalty Fee | \$70.00 |
| October 13, 2015 | CO Residential 1&2 Units No Entry Penalty Fee | \$70.00 |

PAY THIS AMOUNT: \$336.00

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

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



Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$336.00

Customer #: 981698

Ref. #: 114125

Folder RSN : 3988488

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|-----------------------------------|-------------------------------------|---|---|----------------------------------|--|--|--|--|
| <input type="checkbox"/> Amex | <input type="checkbox"/> MasterCard |  |  | Expiration Date: Month / Year | | | | |
| <input type="checkbox"/> Discover | <input type="checkbox"/> Visa | Security Code | | | | | | |
| Enter Account Number | | | | | | | | |