

STATE OF MINNESOTA)
) ss.

AFFIDAVIT OF SERVICE BY U.S. MAIL

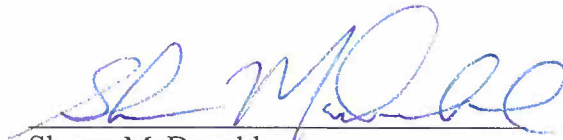
COUNTY OF RAMSEY)

Shawn McDonald, being first duly sworn, deposes and says that on the 25th day of November, he served the attached **NOTICE OF INTENT TO SUSPEND LICENSE** and a correct copy thereof in an envelope addressed as follows:

Kay's Massage
917 Barclay Street
Saint Paul, MN 55106
Attn: Kong Xiong

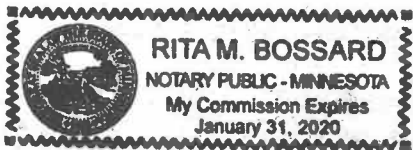
Chuck Repke, Executive Director
District 2 Community Council
1365 Prosperity Avenue
Saint Paul, MN 55106

(which is the last known address of said person) depositing the same, with postage prepaid, in the United States mail at St. Paul, Minnesota.


Shawn McDonald

Subscribed and sworn to before me
This 25th day of November 2019


Notary Public





CITY OF SAINT PAUL
Mayor Melvin Carter

Civil Division
400 City Hall
15 West Kellogg Blvd.
Saint Paul, Minnesota 55102

Telephone: 651 266-8710
Facsimile: 651 298-5619

November 25, 2019

NOTICE OF INTENT TO SUSPEND LICENSES

Kay's Massage
917 Barclay Street
Saint Paul, MN 55106
Attn: Kong Xiong

RE: Massage Center- B (Home Location) license held by Kong Xiong d/b/a Kay's Massage for the City of Saint Paul
License ID #: 20130003212

Dear Licensee:

The Department of Safety and Inspections ("Department") will recommend suspension of the Massage Center- B (Home Location) license held by Kong Xiong ("Licensee") for the premises known as Kay's Massage for the City of Saint Paul.

The Department asserts the following facts along with attachments herein constitute proof of a violation of Saint Paul Legislative Code §310.05 (m) (8) by a preponderance of the evidence.

On October 3, 2019, you were sent a letter and RENEWAL INVOICE from the Department of Safety and Inspections indicating your Massage Center- B (Home Location) license fees were now delinquent.

You were told to pay the delinquent license and late fees by October 24, 2019 or adverse action would be taken. As of today, we have not heard from you.

You have four (4) options to proceed:

1. If you do not contest the imposition of the proposed adverse action, you may do nothing. If I have not heard from you by **Friday, December 6, 2019**, I will presume that you have chosen not to contest the proposed adverse action, and the matter will be placed on the City Council Consent Agenda for approval of the proposed remedy.
2. You can pay the delinquent Massage Center- B (Home Location) license and late fees. **If this is your choice, you need to contact the Department of Safety and Inspections (651) 266-8989 to determine the total amount due.** You may then send the payment and information directly to DSI at 375 Jackson Street, Ste. 220, St. Paul, Minnesota 55101-1806 no later than **Wednesday, December 4, 2019**. A self-addressed envelope is enclosed for your convenience. Payment of the delinquent Massage Center- B (Home Location) license and late fees will be considered a waiver of the hearing to which you are entitled.

3. If you wish to admit the facts but contest the penalty, you may have a public hearing before the Saint Paul City Council, you will need to send me a letter with a statement admitting the facts and requesting a public hearing by **Friday, December 6, 2019**. The matter will then be scheduled before the City Council to determine whether to suspend your Massage Center- B (Home Location) license. You will have an opportunity to appear before the Council and make a statement on your own behalf.
4. If you no longer wish to do business in the City of Saint Paul, you will need to complete and return the attached REQUEST TO CANCEL LICENSE with the CITY OF SAINT PAUL to the Department of Safety and Inspections, at 375 Jackson Street, Ste. 220, St. Paul, Minnesota 55101-1806 no later than **Friday, December 6, 2019**.

If you have not contacted me by Friday, December 6, 2019, I will assume that you do not contest the suspension of your Massage Center- B (Home Location) license. In that case, the matter will be placed on the City Council Consent Agenda for approval of the recommended penalty.

If you have questions about these options, please feel free to contact Shawn McDonald, my Legal Assistant at (651) 266-8729.

Sincerely,



Therese Skarda
Assistant City Attorney
License No. 0240989

Cc: Chuck Repke, Executive Director, 1365 Prosperity Avenue, Saint Paul, MN 55106

Attachments: October 3, 2019 letter with attached Renewal Invoice dated October 3, 2019
REQUEST TO CANCEL LICENSE with the CITY OF SAINT PAUL
Saint Paul Legislative Code § 310.05 (m)



CITY OF SAINT PAUL

375 Jackson Street, Suite 220
St Paul, Minnesota 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi

October 3, 2019

Kay's Massage
917 Barclay St
St Paul MN 55106

RE: License ID # 20130003212
@ 917 Barclay St

Dear Licensee:

Our records indicate that the above referenced license(s) which were issued to you have expired and are now delinquent. Renewal of the license(s) is required if you intend to engage in the licensed activity within the City of St Paul.

You must complete the renewal of your license(s) by Oct 24, 2019 or we may submit your delinquent/expired license(s) to the City Attorney's office for adverse action. To complete the renewal process, submit to this department payment of the renewal fee (including any late fees) and all required supporting documentation as stated on the enclosed invoice.

For your convenience, a copy of the referenced invoice and a self-addressed return envelope is enclosed. If you are no longer working within the City of Saint Paul, please advise our office of that information in writing.

If you have questions regarding this notice, or wish to dispute that your license is delinquent/expired, please contact our office at 651-266-8989, Monday through Friday, between 8:00 AM and 4:30 PM.

Sincerely,

Eric Hudak
Licensing Manager
Department of Safety and Inspections

Enclosure(s)



Renewal Invoice

CITY OF SAINT PAUL

Check this box if making any name, mailing address or phone # corrections. Please write the changes on this form. If your business license address is changing, please request a new business license application

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

October 3, 2019

| | |
|--|---|
| <p>KONG XIONG KAY'S MASSAGE 917 BARCLAY ST ST PAUL MN 55106</p> <p>BUSINESS PHONE: 651-434-9397</p> | <p>Invoice # : 1070026</p> <p>Invoice Due Date : Upon Receipt</p> <p>Account Balance: \$105.00</p> <p>Pay this Amount: \$105.00</p> |
|--|---|

| Transaction Description | Transaction Total |
|--|-------------------|
| Inv: 1059425 130003212 Massage Center - B (Home Location) Expires: 09/24/2019 @ 917 BARCLAY ST Late Fee 7-30 days late (10%) | 95.00 10.00 |

| | |
|--------------|-------------------------------------|
| Requirements | Invoice Amount Due: \$105.00 |
|--------------|-------------------------------------|

Your account is overdue. Please mail payment today!!
 *Submit list of massage practitioners currently operating on site

Your Taxpayer Identification is on file. Thank you.

Please Give Us Your Email Address: _____

Please Return this invoice with your payment!

REQUEST TO CANCEL LICENSE with the CITY OF SAINT PAUL

I/We, _____, respectfully request to withdraw
the following license(s):

Application/Business address: _____

Reason(s) for request: _____

Applicant(s) Printed Name, Signature and Title

Date

Please return this completed request by any of the following:

Mail Dept. of Safety and Inspections
Attn: D. LaCasse
375 Jackson St, Ste 220
Saint Paul MN 55101

E-Mail diane.lacasse@ci.stpaul.mn.us

FAX 651-266-9124

Thank you