



**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

Robert Fleming & Assoc., Inc.
 P.O. BOX 50707
 MENDOTA HEIGHTS MN 55150

Bill Date: June 8, 2012
 Customer #: 1334148
 Amount Due: \$681.00
 Due Date: June 23, 2012

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. ****
Payment must be received in this office no later than June 23, 2012 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
412 PIERCE ST

Ref. # 14494
Folder RSN: 1603057

Date	Type of Fee	Amount
November 4, 2011	CO Residential 3+ Units Initial Fee	\$227.00
February 7, 2012	CO Residential 3+ Units Reinspection Fee	\$113.50
March 23, 2012	CO Residential 3+ Units Reinspection Fee	\$113.50
April 25, 2012	CO Residential 3+ Units Reinspection Fee	\$113.50
May 8, 2012	CO Residential 3+ Units Reinspection Fee	\$113.50

PAY THIS AMOUNT: \$681.00

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: \$681.00

Customer #: 1334148 Ref. #: 14494 Folder RSN : 1603057

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