



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

361

December 6, 2018

K 3 Investment
528 Rice St
St Paul MN 55103-2131

Brad Ballard K 3 Investment
1317 Rice St
Saint Paul MN 55117-4540

Dear K 3 Investment, and others, if listed:

On December 5, 2018, this department conducted an inspection of your property at **554 CHARLES AVE** and because **you have had three or more violations within a 12 month period**

Deficiency: "Remove snow and ice from public sidewalk full width including sidewalk ramp to street, salt and sand as needed."

YOU ARE BEING BILLED \$122.00 for the cost of this inspection. This is in accordance with Chapter 34.24 of the Saint Paul Legislative Code. Payment is due upon receipt of this letter. Make your check payable to the "City of Saint Paul" and mail your payment to:

Department of Safety and Inspections, Code Enforcement
Excessive Consumption Unit
375 Jackson Street, Suite 220
St. Paul, MN 55101-1806

If you do not pay within 30 days
the amount of this bill, plus administrative costs, will be assessed to your property taxes.

NOTICE

Your property is next scheduled for a REINSPECTION on

December 10, 2018

WARNING

IF YOU HAVE AN ADDITIONAL VIOLATION WITHIN 12 MONTHS YOU WILL BE BILLED AN ADDITIONAL \$120.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Matt Dornfeld, at 651-266-1902

Matt Dornfeld
Code Enforcement Inspector

City of Saint Paul, Department of Department of Safety and Inspections

December 6, 2018

EXCESSIVE CONSUMPTION

Invoice #: 1412148

File #: 18-029313

Property Address: 554 CHARLES AVE

Property PIN: 362923230073

Owner Name: K 3 Investment

Fee Description

Amount

Excessive Consumption (Multiple Visits)

\$ 122.00

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Make your check payable to the City of Saint Paul.

Send payment to:

Department of Safety and Inspections
Excessive Consumption Unit
375 Jackson Street, Suite 220
St. Paul, MN 55101-1806

Keep this portion for your records:

Date Paid: _____ Amount Paid: _____ Check or Money Order #: _____

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RETURN this portion with your payment.

City of Saint Paul, Department of Department of Safety and Inspections, Code Enforcement Division

EXCESSIVE CONSUMPTION PAYMENT

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Invoice #: 1412148 **Invoice Date:** December 6, 2018

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