



375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 Tel: 651-266-8989 | Fax: 651-266-9124

August 20, 2024

Kathryn Lida Klemme 10580 Kumquat St Nw # 9 Minneapolis MN 55448-1525 Occupant 2002 James Ave St Paul MN 55105-1720

Dear Kathryn Lida Klemme and others, if listed:

On August 19, 2024, this department conducted an inspection of your property at **2002 JAMES AVE** and because **you were not compliant with a previous order**.

Deficiency: "Garage and house repairs have not been completed. Garage permit has expired due to inaction. New Permit will be needed."

**YOU ARE BEING BILLED <u>\$134</u>**, 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 scheduled for a REINSPECTION on September 3, 2024.

#### \*\*WARNING\*\*

IF YOU DO NOT HAVE THE VIOLATION(S) CORRECTED BY THE NEXT INSPECTION DATE, September 3, 2024, YOU WILL BE BILLED AN ADDITIONAL \$134.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Richard Kedrowski, 651-266-9141

Richard Kedrowski Code Enforcement Inspector

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

August 20, 2024

### **EXCESSIVE CONSUMPTION**

Invoice #: 1886466

File #: 23-038401

Property Address: 2002 JAMES AVE

Property PIN: 092823230193

Owner Name: Kathryn Lida Klemme

Fee DescriptionAmountExcessive Consumption (Non Compliance)\$ 134

Payment is due upon receipt of this letter. <u>Failure to pay within 30 days will result in the amount due assessed to your property taxes.</u> 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

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