



**Fire Certificate of Occupancy
Fee Invoice**

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

DARRELL LEWIS
 PO BOX 165
 SAUK CENTER MN 56378

Bill Date: July 30, 2014
 Customer #: 1394760

Amount Due: \$300.00
 Due Date: August 30, 2014

**** Late fees will be charged if not paid by due date ****

Property Address:
722 GERANIUM AVE E

Ref. # 107501
Folder RSN: 3653623

Date	Type of Fee	Amount
June 16, 2014	CO Residential 1 & 2 Units Initial Fee	\$200.00
July 28, 2014	CO Residential 1&2 Unit Reinspection Fee	\$100.00

PAY THIS AMOUNT: \$300.00

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: \$300.00

Customer #: 1394760

Ref. #: 107501

Folder RSN : 3653623

<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								