

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

GWYNNE EVANS P.O.BOX 16426 SAINT PAUL MN 55116-0426 Bill Date: March 3, 2014 Customer #: 771617

Amount Due: \$367.50 Due Date: March 18, 2014

* * You were sent a Fire Inspection Fee Invoice and payment has not been receieved. * * Payment must be received in this office no later than March 18, 2014 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address: 1765 RANDOLPH AVE

13751 Ref.#

Folder RSN: 1918904

Date

October 11, 2013

January 29, 2014

Type of Fee CO Residential 3+ Units Initial Fee CO Residential 3+ Units Reinspection Fee

Amount \$245.00 \$122.50

\$367.50 **PAY THIS AMOUNT:**

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 Customer #: 771617 | | COMPLETE THE FO | OLLOWING INFORMATIO Folder RSN : 19 | | nount: \$367. | 50 |
| ☐ Amex ☐ ☐ Discover ☐ | MasterCard Visa | A Digit Verification Number Security Code: | Visa, MasterCard, Discover | Expiration Date: Month / Year | | |
| Enter Account Number | | 1 | | | | |