

## 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

GWYNNE EVANS P.O.BOX 16426 SAINT PAUL MN 55116-0426 Bill Date: January 31, 2014

Customer #: 771617

Amount Due: \$367.50

Due Date: February 28, 2014

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

Property Address: 1765 RANDOLPH AVE Ref. #

13751

**Folder RSN: 1918904** 

**Date**October 11, 2013
January 29, 2014

Type of Fee

Amount

CO Residential 3+ Units Initial Fee CO Residential 3+ Units Reinspection Fee \$245.00 \$122.50

**PAY THIS AMOUNT:** 

\$367.50

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: \$367.50  Customer #: 771617 Ref. #: 13751 Folder RSN: 1918904					
Amex Maste Discover Visa	erCard  A Digit Verification  Security Code	Number 3 Digit Verification Number	Expiration Date:  Month / Year		
Enter Account Number	1				