

CITY OF SAINT PAUL DEPARTMENT OF SAFETY AND INSPECTIONS 375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 General Information: 651-266-9090

Code Compliance: 651-266-9016 - Fax: 651-266-9124 Visit our web site: www.stpaul.gov/dsi Fax: 651-266-9124

FOLDER# (for office use only) 17-081025

## VACANT BUILDING \$5,000.00 PERFORMANCE DEPOSIT

| DATE 9-4-18   |                            |
|---|----------------------------|
| VACANT BUILDING ADDRESS 522-4 OTIS Ave , ST Paul, 19  | 1N                         |
| DEPOSITOR'S NAME SEA CHERNAL DIRA OTIS AVENUE LLC   |                            |
| DEPOSITOR'S ADDRESS 463 Desnover Ave ST Punt 1410 55/00   |                            |
| CITY ST Paul STATE 19N ZIP CODE 55104   |                            |
| DAYTIME PHONE (6/2) 308 - 25-42 FAX NUMBER ()   |                            |
| When your project is completed and approved, your \$5,000.00 performance deposit plus interest will be refunded to you.   |                            |
| I understand that all items listed on the inspection report must be corrected within six (6) months and where applicable (Categor Building), a \$5,000.00 performance deposit (cash or bond) must be made before a permit will be issued. It may be possible to additional six (6) months to complete project if work is proceeding expeditiously and is more than 50% complete or if unforeseen conditions have had a significant schedule impact on the completion of work. | y 3 <sup>.</sup><br>get an |
| I also understand that this property shall $\underline{not}$ be occupied until all code corrections are made and written authorization to occupy obtained.  | is                         |
| Please indicate below the address your Refund Check should be sent to:  |                            |
| NAME SER Chermak P.B.A OTISAVENUE WE  |                            |
| CITY ST Paul STATE MU ZIP 55/04   |                            |
| CITY ST Paul STATE 19/0 ZIP 55/04   |                            |
|   |                            |
| IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION:   |                            |
| American Express Discover MasterCard Visa   |                            |
| Expiration Date: Account Number: Amount: \$   |                            |
|   |                            |
| Signature of Card Holder (required for all charges)  Date   |                            |

OTIS AVENUE LLC
463 DESNOYER AVE
SAINT PAUL MN 55104-5254

PAY TO THE ORDER OF CITY OF SAINT PAUL
PAY TO THE ORDER OF Dollars 1 Dollars



## **RECEIPT**

## CITY OF SAINT PAUL

Department of Safety & Inspections 375 Jackson Street, Suite 220 Saint Paul, MN 55101- 1806 Phone: 651- 266- 8989

Fax: 651- 266- 9124 www.stpaul.gov/dsi

Payment #: 1292385

Payment Date: September 04, 2018

Paid JEFF CHERMAK

By: 463 DESNOVER

463 DESNOYER AVE ST PAUL MN 55104

Amount Paid: \$5,000.00

Payment Type: Check

WORK: 612-308-7542

Transaction Description

Project Location: 522 OTIS AVE

ST PAUL MN 55104-4948

17-081025

TYPE: VACANT BUILDING

SUB TYPE: CATEGORY 3 WORK TYPE: DUPLEX

Lock Box combination

3 5 7

**FEES** 

Performance Deposit

\$ 5,000.00

**TOTAL** 

\$ 5,000.00

<sup>\*\*</sup> To schedule a Vacant Building Code Compliance Inspection, call Jim Seeger at 651-266-8989 between 7:30 and 9: 00 AM, Monday - Friday. \*\*