



**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

ZHI KAI YU
 699 VIRGINIA ST
 ST PAUL MN 55103

Bill Date: March 9, 2011
 Customer #: 1282409

Amount Due: \$255.00
 Due Date: April 9, 2011

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

Property Address:
 1244 MATILDA ST

Ref. # 115377
Folder RSN: 2433139

Date	Type of Fee	Amount
December 29, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00
March 8, 2011	CO Residential 1&2 Unit Reinspection Fee	\$85.00

PAY THIS AMOUNT: \$255.00

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: \$255.00

Customer #: 1282409 Ref. #: 115377 Folder RSN : 2433139

<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	Expiration Date: Month / Year				
Enter Account Number								