



**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

D PATRICK CONNELLY
 1516 ASHLAND AVE UNIT 1
 ST PAUL MN 55104

Bill Date: July 29, 2010
 Customer #: 1000301

Amount Due: \$327.00
 Due Date: August 29, 2010

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

Property Address:
1516 ASHLAND AVE

Ref. # 12339
Folder RSN: 1146836

Date	Type of Fee	Amount
May 5, 2010	CO Residential 3+ Units Initial Fee	\$218.00
July 28, 2010	CO Residential 3+ Units Reinspection Fee	\$109.00

PAY THIS AMOUNT: \$327.00

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: \$327.00

Customer #: 1000301 Ref. #: 12339 Folder RSN : 1146836

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



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REAL ESTATE INVESTORS GROUP
 978 AURORA AVE
 ST PAUL MN 55104

Bill Date: July 29, 2010
 Customer #: 1065154

Amount Due: \$200.00
 Due Date: August 29, 2010

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

Property Address:
671 BEDFORD ST

Ref. # 107891
Folder RSN: 1397275

Date	Type of Fee	Amount
July 6, 2010	CO Residential 1 & 2 Units Initial Fee	\$200.00

PAY THIS AMOUNT: \$200.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$200.00

Customer #: 1065154 Ref. #: 107891 Folder RSN : 1397275

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



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STEVEN FLYNN SUSAN TALBOT
 1407 ALBANY AVE
 ST PAUL MN 55108-2502

Bill Date: July 29, 2010
 Customer #: 1278206

Amount Due: \$170.00
 Due Date: August 29, 2010

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

Property Address:
1525 BREDA AVE

Ref. # 115408
Folder RSN: 2436702

Date	Type of Fee	Amount
July 14, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00

PAY THIS AMOUNT: \$170.00

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 St. Paul, MN 55102-1806

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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$170.00

Customer #: 1278206 Ref. #: 115408 Folder RSN : 2436702

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



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DAVID N HARWOOD KATHLEEN HARWOOD
 2214 BONNIE LANE
 ST PAUL MN 55119-5669

Bill Date: July 29, 2010
 Customer #: 937129

Amount Due: \$170.00
 Due Date: August 29, 2010

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

Property Address:
188 BRIDLEWOOD DRIVE

Ref. # 101384
Folder RSN: 1390768

Date	Type of Fee	Amount
May 5, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00

PAY THIS AMOUNT: \$170.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$170.00

Customer #: 937129 Ref. #: 101384 Folder RSN : 1390768

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



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MICHELLE RALEIGH
 289 THOMAS AVE
 ST PAUL MN 55103-1738

Bill Date: July 29, 2010
 Customer #: 997290

Amount Due: \$128.00
 Due Date: August 29, 2010

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

Property Address:
896 CHARLES AVE

Ref. # 100552
Folder RSN: 1427678

Date	Type of Fee	Amount
August 7, 2008	CO Residential 1 & 2 Units Initial Fee	\$128.00

PAY THIS AMOUNT: \$128.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$128.00

Customer #: 997290 Ref. #: 100552 Folder RSN : 1427678

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



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JOSE L ESCOTO
 55 SALEM CHURCH RD
 WEST ST PAUL MN 55118-4742

Bill Date: July 29, 2010
 Customer #: 826150

Amount Due: \$170.00
 Due Date: August 29, 2010

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

Property Address:
46 ELIZABETH ST E

Ref. # 109679
Folder RSN: 1472650

Date	Type of Fee	Amount
May 19, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00

PAY THIS AMOUNT: \$170.00

Mail to: Billing
 Saint Paul Fire Inspection
 375 Jackson Street, Suite 220
 St. Paul, MN 55102-1806

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IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$170.00

Customer #: 826150 Ref. #: 109679 Folder RSN : 1472650

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



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ANTONA M RICHARDSON
 317 OWASSO BLVD S
 ROSEVILLE MN 55113-2119

Bill Date: July 29, 2010
 Customer #: 945498

Amount Due: \$425.00
 Due Date: August 29, 2010

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

Property Address:
984 HAMPDEN AVE

Ref. # 103536
Folder RSN: 1392920

Date	Type of Fee	Amount
March 1, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00
April 19, 2010	CO Residential 1&2 Unit Reinspection Fee	\$85.00
July 19, 2010	CO Residential 1&2 Unit Reinspection Fee	\$85.00
July 28, 2010	CO Residential 1&2 Unit Reinspection Fee	\$85.00

PAY THIS AMOUNT: \$425.00

Mail to: Billing
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 St. Paul, MN 55102-1806

Make Checks Payable to: City of St. Paul
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$425.00

Customer #: 945498 Ref. #: 103536 Folder RSN : 1392920

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



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STUART MANAGEMENT MARYLAND PARK APARTMENTS
 1050 W 80TH ST
 BLOOMINGTON MN 55420-1009

Bill Date: July 29, 2010
 Customer #: 1188501

Amount Due: \$1,512.00
 Due Date: August 29, 2010

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

Property Address:
1239 HERBERT ST

Ref. # 16267
Folder RSN: 1214535

Date	Type of Fee	Amount
April 27, 2010	CO Residential 3+ Units Initial Fee	\$756.00
July 26, 2010	CO Residential 3+ Units Reinspection Fee	\$378.00
July 28, 2010	CO Residential 3+ Units Reinspection Fee	\$378.00

PAY THIS AMOUNT: \$1,512.00

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: \$1,512.00

Customer #: 1188501 Ref. #: 16267 Folder RSN : 1214535

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



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HERROD LLC
 977 PAYNE AVE
 ST PAUL MN 55130-3901

Bill Date: July 29, 2010
 Customer #: 1059246

Amount Due: \$670.00
 Due Date: August 29, 2010

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

Property Address:
629 JENKS AVE

Ref. # 15676
Folder RSN: 2239068

Date	Type of Fee	Amount
January 7, 2002	Fire Re-inspection Fee	\$100.00
February 6, 2002	Fire Re-inspection Fee	\$100.00
May 14, 2002	Fire Re-inspection Fee	\$100.00
June 14, 2002	Fire Re-inspection Fee	\$100.00
March 4, 2010	CO Commercial Initial Fee	\$180.00
July 28, 2010	CO Commercial Reinspection Fee	\$90.00

PAY THIS AMOUNT: \$670.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$670.00

Customer #: 1059246 Ref. #: 15676 Folder RSN : 2239068

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



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TWINCITY PROPERTY HOLDINGS LL
 290 LARCH ST
 ST PAUL MN 55117-5307

Bill Date: July 29, 2010
 Customer #: 1253792

Amount Due: \$180.00
 Due Date: August 29, 2010

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

Property Address:
290 LARCH ST

Ref. # 73313
Folder RSN: 1754416

Date	Type of Fee	Amount
June 9, 2010	CO Commercial Initial Fee	\$180.00

PAY THIS AMOUNT: \$180.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$180.00

Customer #: 1253792 Ref. #: 73313 Folder RSN : 1754416

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



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MICHAEL J KIEFFER SR
 549 MINNEHAHA AVE E
 SAINT PAUL MN 55110

Bill Date: July 29, 2010
 Customer #: 768784

Amount Due: \$350.00
 Due Date: August 29, 2010

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

Property Address:
549 MINNEHAHA AVE E

Ref. # 10257
Folder RSN: 1355332

Date	Type of Fee	Amount
June 24, 2010	CO Commercial Initial Fee	\$350.00

PAY THIS AMOUNT: \$350.00

Mail to: Billing
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 375 Jackson Street, Suite 220
 St. Paul, MN 55102-1806

Make Checks Payable to: City of St. Paul
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$350.00

Customer #: 768784 Ref. #: 10257 Folder RSN : 1355332

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



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DAN CARLSON
 3609 E 47TH ST
 MINNEAPOLIS MN 55406-3866

Bill Date: July 29, 2010
 Customer #: 1069709

Amount Due: \$170.00
 Due Date: August 29, 2010

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

Property Address:
1976 MINNEHAHA AVE E

Ref. # 108975
Folder RSN: 1449795

Date	Type of Fee	Amount
June 15, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00

PAY THIS AMOUNT: \$170.00

Mail to: Billing
 Saint Paul Fire Inspection
 375 Jackson Street, Suite 220
 St. Paul, MN 55102-1806

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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$170.00

Customer #: 1069709 Ref. #: 108975 Folder RSN : 1449795

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



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WINNIPEG APARTMENTS LIMITED
 7151 YORK AVE S
 EDINA MN 55435

Bill Date: July 29, 2010
 Customer #: 1072423

Amount Due: \$625.00
 Due Date: August 29, 2010

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

Property Address:
850 RICE ST

Ref. # 112689
Folder RSN: 1688205

Date	Type of Fee	Amount
June 16, 2010	CO Commercial Initial Fee	\$625.00

PAY THIS AMOUNT: \$625.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$625.00

Customer #: 1072423 Ref. #: 112689 Folder RSN : 1688205

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



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FT PROPERTIES MINNESOTA LLC
 2124 UNIVERSITY AVE #100
 ST PAUL MN 55114-1838

Bill Date: July 29, 2010
 Customer #: 924956

Amount Due: \$180.00
 Due Date: August 29, 2010

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

Property Address:
1759 SELBY AVE

Ref. # 74250
Folder RSN: 1471341

Date	Type of Fee	Amount
July 15, 2010	CO Commercial Initial Fee	\$180.00

PAY THIS AMOUNT: \$180.00

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
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$180.00

Customer #: 924956 Ref. #: 74250 Folder RSN : 1471341

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



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TRIKIN HOLDINGS LLC
 430 WHISPERING PINES RD N
 HUDSON WI 54016-8011

Bill Date: July 29, 2010
 Customer #: 1232070

Amount Due: \$400.00
 Due Date: August 29, 2010

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

Property Address:
1734 SIMS AVE

Ref. # 114723
Folder RSN: 1947757

Date	Type of Fee	Amount
April 30, 2010	CO Residential 1 & 2 Units Initial Fee	\$200.00
June 25, 2010	CO Residential 1&2 Unit Reinspection Fee	\$100.00
July 28, 2010	CO Residential 1&2 Unit Reinspection Fee	\$100.00

PAY THIS AMOUNT: \$400.00

Mail to: Billing
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IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$400.00

Customer #: 1232070 Ref. #: 114723 Folder RSN : 1947757

<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	Expiration Date: Month / Year				
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 An Equal Opportunity Employer

GHAFFARI, NASSEH
 13443 FLAGSTAFF AVENUE
 APPLE VALLEY MN 551240000

Bill Date: July 29, 2010
 Customer #: 652265

Amount Due: \$180.00
 Due Date: August 29, 2010

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

Property Address:
877 WESTMINSTER ST

Ref. # 16965
Folder RSN: 1728477

Date	Type of Fee	Amount
June 11, 2010	CO Commercial Initial Fee	\$180.00

PAY THIS AMOUNT: \$180.00

Mail to: Billing
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 St. Paul, MN 55102-1806

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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$180.00

Customer #: 652265 Ref. #: 16965 Folder RSN : 1728477

<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	Expiration Date: Month / Year				
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BRIAN BRAM
 638 WHEELER ST N
 ST PAUL MN 55104-1736

Bill Date: July 29, 2010
 Customer #: 970220

Amount Due: \$418.00
 Due Date: August 29, 2010

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

Property Address:
638 WHEELER ST N

Ref. # 115022
Folder RSN: 2141770

Date	Type of Fee	Amount
January 27, 2010	CO Residential 3+ Units Initial Fee	\$209.00
May 27, 2010	CO Residential 3+ Units Reinspection Fee	\$104.50
July 28, 2010	CO Residential 3+ Units Reinspection Fee	\$104.50

PAY THIS AMOUNT: \$418.00

Mail to: Billing
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Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$418.00

Customer #: 970220 Ref. #: 115022 Folder RSN : 2141770

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