



**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

Darrell Lewis  
 PO BOX 165  
 SAUK CENTER MN 56378

Bill Date: August 29, 2014  
 Customer #: 1394760  
 Amount Due: \$300.00  
 Due Date: September 13, 2014

**\*\* You were sent a Fire Inspection Fee Invoice and payment has not been received. \*\***  
**Payment must be received in this office no later than September 13, 2014 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.**

**Property Address:**  
**722 GERANIUM AVE E**

**Ref. # 107501**  
**Folder RSN: 3653623**

Date	Type of Fee	Amount
June 16, 2014	CO Residential 1 & 2 Units Initial Fee	\$200.00
July 28, 2014	CO Residential 1&2 Unit Reinspection Fee	\$100.00

**PAY THIS AMOUNT: \$300.00**



**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 CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$300.00**

Customer #: 1394760      Ref. #: 107501      Folder RSN : 3653623

<input type="checkbox"/> Amex	<input type="checkbox"/> MasterCard			Expiration Date: Month / Year					
<input type="checkbox"/> Discover	<input type="checkbox"/> Visa	4 Digit Verification Number	3 Digit Verification Number						
Enter Account Number		Security Code:							