



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

The Sharing Korner
439 Thomas Ave
Saint Paul MN 55103-1626

Bill Date: February 27, 2014
Customer #: 1366879

Amount Due: \$180.00
Due Date: March 14, 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 March 14, 2014 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
439 THOMAS AVE

Ref. # 116214
Folder RSN: 3302917

Date	Type of Fee	Amount
November 19, 2013	CO Commercial Initial Fee	\$180.00

PAY THIS AMOUNT: \$180.00



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: \$180.00

Customer #: 1366879 Ref. #: 116214 Folder RSN : 3302917

<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:							