



**Fire Certificate of Occupancy
Fee Invoice**

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

☐ Check this box if making any name or mailing address corrections.

ABBIE FINGER
5305 26TH AVE S
MINNEAPOLIS MN 55417- 1923

Bill Date: August 17, 2018
Customer #: 1557637

Amount Due: \$242.00
Due Date: September 17, 2018

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

Property Address:
819 AURORA AVE

Ref.# 107978
Folder RSN: 4253992

Date	Type of Fee	Amount
July 16, 2018	CO Residential 1 & 2 Units Initial Fee	\$242.00

PAY THIS AMOUNT: \$242.00

Mail to: Billing
Saint Paul Fire Inspection
375 Jackson Street, Suite 220
St. Paul, MN 55101- 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: \$242.00**

Customer #: 1557637

Ref. #: 107978

Folder RSN : 4253992

☐ Amex ☐ MasterCard			Expiration Date: Month / Year				
☐ Discover ☐ Visa	Security Code						
Enter Account Number							