



**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

KAIZEN PROPERTY SOLUTIONS, LLC ATT MARY DURKOP
 PO BOX 48223
 MINNEAPOLIS MN 55448

Bill Date: December 8, 2011
 Customer #: 1316750

Amount Due: \$1,052.00
 Due Date: January 8, 2012

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

**Property Address:
604 HOLLY AVE**

**Ref. # 15531
Folder RSN: 1660864**

Date	Type of Fee	Amount
July 20, 2010	CO Residential 3+ Units Initial Fee	\$263.00
December 15, 2010	CO Residential 3+ Units Reinspection Fee	\$131.50
April 6, 2011	CO Residential 3+ Units Reinspection Fee	\$131.50
May 11, 2011	CO Residential 3+ Units Reinspection Fee	\$131.50
June 10, 2011	CO Residential 3+ Units Reinspection Fee	\$131.50
October 31, 2011	CO Residential 3+ Units Reinspection Fee	\$131.50
December 7, 2011	CO Residential 3+ Units Reinspection Fee	\$131.50

PAY THIS AMOUNT: \$1,052.00

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: \$1,052.00

Customer #: 1316750 Ref. #: 15531 Folder RSN : 1660864

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