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

TENG YANG
1324 WILSON AVE
ST PAUL MN 55106-5552

Bill Date: April 22, 2013
Customer #: 1288020

Amount Due: $170.00
Due Date: May 7, 2013

*** * You were sent a Fire Inspection Fee Invoice and payment has not been receieved. * ***
Payment must be received in this office no later than May 7, 2013 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
1887 LACROSSE AVE

Ref. # 115825
Folder RSN: 2896612

Date	Type of Fee	Amount
January 15, 2013	CO Residential 1 & 2 Units Initial Fee	$170.00

PAY THIS AMOUNT: $170.00

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: $170.00

Customer #: 1288020 **Ref. #: 115825** **Folder RSN : 2896612**

☐ American Express	☐ Discover	☐ MasterCard	☐ Visa	Expiration Date: Month / Year				
Enter Account Number								