



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-1919
Web: www.stpaul.gov/dsi

325

July 12, 2012

Bme Properties Llc
1585 Cottage Ave E
Saint Paul MN 55106-2203

Dear Bme Properties Llc, and others, if listed:

On July 12, 2012, this department conducted an inspection of your property at **1207 5TH ST E** and because **this is your third violation within a 12 month period**

Deficiency: Garbage, rubbish, trash, or other sanitation issues at the property. (containers, storage, garbage hauler, etc.)

YOU ARE BEING BILLED \$50.00 for the cost of this inspection. This is in accordance with Chapter 34.24 of the Saint Paul Legislative Code. Payment is due upon receipt of this letter. Make your check payable to the "City of Saint Paul" and mail your payment to:

Department of Safety and Inspections, Code Enforcement
Excessive Consumption Unit
375 Jackson Street, Suite 220
St. Paul, MN 55101-1806

If you do not pay within 30 days
the amount of this bill, plus administrative costs, will be assessed to your property taxes.

NOTICE

Your property is next scheduled for a REINSPECTION on

July 19, 2012

WARNING

IF YOU HAVE AN ADDITIONAL VIOLATION WITHIN 12 MONTHS YOU WILL BE BILLED AN ADDITIONAL \$75.00 . CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Ed Smith, at 651-266-1917

Ed Smith
Code Enforcement Inspector

cc60169 10/11

City of Saint Paul, Department of Department of Safety and Inspections

July 12, 2012

EXCESSIVE CONSUMPTION
INVOICE # 989735

File #: 12-017202
Property Address: 1207 5TH ST E
Property PIN: 332922110183
Owner Name: Bme Properties Llc

<u>Fee Description</u>	<u>Amount</u>
Excessive Consumption Multiple \$50 Fee	\$ 50.00

Payment is due upon receipt of this letter.

Failure to pay within 30 days will result in this amount being assessed to your property taxes.

Make your check payable to the ACity of Saint Paul@.

Send payment to:	Department of Safety and Inspections Excessive Consumption Unit 375 Jackson Street, Suite 220 St. Paul, MN 55101-1806
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Keep this portion for your records: Date Paid: _____ Amt Paid: _____

Ck or M.O. # _____

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RETURN this portion with your payment

City of Saint Paul, Department of Department of Safety and Inspections, Code Enforcement Division

EXCESSIVE CONSUMPTION PAYMENT

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RETURN THIS PORTION WITH YOUR PAYMENT