



SAINT PAUL
SAFETY & INSPECTIONS

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)
ANGIE WIESE, PE(MN), CBO, DIRECTOR

375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
Tel: 651-266-8989 | Fax: 651-266-9124

July 19, 2022

Tyler Armstrong
2007 Lombardy Ave
Nashville Tennessee 37215

Dear Joe Prescott and others, if listed:

On July 19, 2022, this department conducted an inspection of your property at **277 AURORA AVE** and because **you were not compliant with a previous order.**

Deficiency: "Inoperable vehicle(s) parked behind the garage have not been removed or put into compliance upon reinspection."

YOU ARE BEING BILLED \$124.00 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 scheduled for a REINSPECTION on **August 1, 2022.**

****WARNING****

IF YOU DO NOT HAVE THE VIOLATION(S) CORRECTED BY THE NEXT INSPECTION DATE, August 1, 2022, YOU WILL BE BILLED AN ADDITIONAL \$124.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Otis Warner, 651-266-1906

Otis Warner
Code Enforcement Inspector

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

July 19, 2022

EXCESSIVE CONSUMPTION

Invoice #: 1670786

File #: 22-044163

Property Address: 277 AURORA AVE

Property PIN: 362923420035

Owner Name: Joe Prescott

Fee Description

Amount

Excessive Consumption (Non Compliance)

\$ 124.00

Payment is due upon receipt of this letter. **Failure to pay within 30 days will result in the amount due assessed to your property taxes.** Make your check payable to the City of Saint Paul.

Send payment to: Department of Safety and Inspections
Excessive Consumption Unit
375 Jackson Street, Suite 220
St. Paul, MN 55101-1806

Keep this portion for your records:

Date Paid: _____ Amount Paid: \$ _____ Check or Money Order #: _____

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*****RETURN THIS PORTION WITH YOUR PAYMENT*****

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

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