



Fire Certificate of Occupancy

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

SHARON GOODMAN JOHN GOODMAN
2197 SCHEFFER AVE
ST PAUL MN 55116-1161

Bill Date: January 28, 2015
Customer #: 1406277

Amount Due: \$290.00
Due Date: February 28, 2015

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

Property Address:
537 MOUNT CURVE BLVD

Ref.# 121040
Folder RSN: 3673279

Date	Type of Fee	Amount
November 26, 2013	CO Residential 1 & 2 Units Initial Fee	\$170.00
November 26, 2013	CO Residential 1&2 Units No Entry Penalty Fee	\$60.00
April 15, 2014	CO Residential 1&2 Units No Entry Penalty Fee	\$60.00

PAY THIS AMOUNT: \$290.00

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: \$290.00

Customer #: 1406277

Ref. #: 121040

Folder RSN : 3673279

<input type="checkbox"/> Amex	<input type="checkbox"/> MasterCard			Expiration Date: Month / Year				
<input type="checkbox"/> Discover	<input type="checkbox"/> Visa	4 Digit Verification Number	3 Digit Verification Number					
Security Code								
Enter Account Number								