



**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

JEAN BERGAL FOLGER MICHAEL M FOLGER  
 8241 MARYLAND RD  
 BLOOMINGTON MN 55438-1121

Bill Date: April 14, 2011  
 Customer #: 1074204  
 Amount Due: \$400.00  
 Due Date: April 29, 2011

**\*\* You were sent a Fire Inspection Fee Invoice and payment has not been received. \*\***  
**Payment must be received in this office no later than April 29, 2011 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.**

**Property Address:**  
**24 SUSAN AVE**

**Ref. # 109482**  
**Folder RSN: 1469561**

Date	Type of Fee	Amount
May 25, 2010	CO Residential 1 & 2 Units Initial Fee	\$170.00
December 8, 2010	CO Residential 1&2 Units No Entry Penalty Fee	\$60.00
December 22, 2010	CO Residential 1&2 Unit Reinspection Fee	\$85.00
March 14, 2011	CO Residential 1&2 Unit Reinspection Fee	\$85.00

**PAY THIS AMOUNT: \$400.00**

**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: \$400.00**

**Customer #: 1074204      Ref. #: 109482      Folder RSN : 1469561**

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