



## Fire Certificate of Occupancy

**\*\* 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

CHARLES MCCARTY  
324 -- 3RD ST N  
HUDSON WI 54016-1003

Bill Date: August 17, 2016  
Customer #: 1405521

Amount Due: \$808.00  
Due Date: September 1, 2016

**\*\* You were sent a Fire Inspection Fee Invoice and payment has not been received. \*\***  
Payment must be received in this office no later than September 1, 2016 or the fee invoice plus  
administrative costs will be submitted for assessment to your property tax.

**Property Address:**  
1764 YORK AVE

Ref.# 121012  
Folder RSN: 3671775

<b>Date</b>	<b>Type of Fee</b>	<b>Amount</b>
November 7, 2013	Provisional CO Fee 2013	\$50.00
February 25, 2014	Provisional CO Fee 2014	\$50.00
March 11, 2015	Provisional CO Fee 2015	\$100.00
March 9, 2016	Provisional CO Fee 2016	\$103.00
April 11, 2016	CO Residential 1 & 2 Units Initial Fee	\$202.00
May 10, 2016	CO Residential 1&2 Unit Reinspection Fee	\$101.00
June 13, 2016	CO Residential 1&2 Unit Reinspection Fee	\$101.00
July 14, 2016	CO Residential 1&2 Unit Reinspection Fee	\$101.00

**PAY THIS AMOUNT: \$808.00**

Mail to: Billing  
Saint Paul Fire Inspection  
375 Jackson Street, Suite 220  
St. Paul, MN 55101-1806

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: \$808.00

Customer #: 1405521

Ref. #: 121012

Folder RSN : 3671775

Amex  MasterCard  
 Discover  Visa



Expiration Date:  
Month / Year

Enter Account  
Number

Security Code