



**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

December 27, 2024

Erting Holdahl/Rigo Rojas  
747 Payne Ave  
St Paul MN 55130-4126

Dear Erting Holdahl/Rigo Rojas and others, if listed:

On December 27, 2024, this department conducted an inspection of your property at **747 PAYNE AVE** and because **you were not compliant with a previous order.**

**Deficiency: "VEHICLES REMAIN PARKED ON UNAPPROVED SURFACE. REMOVE TRAILERS FROM THE UNAPPROVED SURFACE FROM BEHIND THE BUILDING."**

**YOU ARE BEING BILLED \$134.** 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 **January 10, 2025.**

**\*\*WARNING\*\***

**IF YOU DO NOT HAVE THE VIOLATION(S) CORRECTED BY THE NEXT INSPECTION DATE, January 10, 2025, YOU WILL BE BILLED AN ADDITIONAL \$134.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Willie Williams, 651-266-1942**

Willie Williams  
Code Enforcement Inspector

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

December 27, 2024

**EXCESSIVE CONSUMPTION**

Invoice #: 1921100

File #: 24-092569

Property Address: 747 PAYNE AVE

Property PIN: 292922430091

Owner Name: Erting Holdahl/Rigo Rojas

**Fee Description**

**Amount**

Excessive Consumption (Non Compliance)

\$ 134

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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**

**EXCESSIVE CONSUMPTION PAYMENT**

**Folder #:** 24-092569  
Invoice: No: 1921100 Date: December 27, 2024  
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