



# Fire Certificate of Occupancy

## 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

**\*\* FINAL NOTICE \*\***

Check this box if making any name or mailing address corrections.

JENNIFER L PRADT  
1676 ENGELWOOD AVE  
ST PAUL MN 55104-1113

Bill Date: August 24, 2017  
Customer #: 941999

Amount Due: \$605.00  
Due Date: September 8, 2017

**\*\* 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 8, 2017 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:  
735 HOLTON ST

Ref.# 105870  
Folder RSN: 4257065

| Date          | Type of Fee                              | Amount   |
|---------------|--|----------|
| March 8, 2017 | CO Residential 1 & 2 Units Initial Fee   | \$242.00 |
| May 11, 2017  | CO Residential 1&2 Unit Reinspection Fee | \$121.00 |
| June 12, 2017 | CO Residential 1&2 Unit Reinspection Fee | \$121.00 |
| July 21, 2017 | CO Residential 1&2 Unit Reinspection Fee | \$121.00 |

### PAY THIS AMOUNT: \$605.00

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: \$605.00

Customer #: 941999

Ref. #: 105870

Folder RSN : 4257065

|                                   |                                     |   |   |                                  |  |  |  |  |
|-----------------------------------|-------------------------------------|---|---|----------------------------------|--|--|--|--|
| <input type="checkbox"/> Amex     | <input type="checkbox"/> MasterCard |  |  | Expiration Date:<br>Month / Year |  |  |  |  |
| <input type="checkbox"/> Discover | <input type="checkbox"/> Visa       | Security Code   |   |                                  |  |  |  |  |
| Enter Account Number              |                                     |   |   |                                  |  |  |  |  |