



**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

AIHOA TRAN THOMAS HUYNH
3007 VALENTINO LANE
LITTLE CANADA MN 55117- 5547

Bill Date: November 2, 2015
Customer #: 1213321

Amount Due: \$392.00
Due Date: November 17, 2015

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. ****
Payment must be received in this office no later than November 17, 2015 or the fee invoice plus
administrative costs will be submitted for assessment to your property tax.

Property Address:
1694 AMES AVE

Ref.# 111638
Folder RSN: 3391885

| Date | Type of Fee | Amount |
|--------------------|--|----------|
| April 24, 2015 | CO Residential 1 & 2 Units Initial Fee | \$196.00 |
| August 14, 2015 | CO Residential 1&2 Unit Reinspection Fee | \$98.00 |
| September 30, 2015 | CO Residential 1&2 Unit Reinspection Fee | \$98.00 |

PAY THIS AMOUNT: \$392.00

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: \$392.00

Customer #: 1213321

Ref. #: 111638

Folder RSN : 3391885

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