



**Fire Certificate of Occupancy
Fee Invoice**

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

DENISE L WING
 333 ODAY ST
 MAPLEWOOD MN 55119-6725

Bill Date: February 4, 2014
 Customer #: 1403938

Amount Due: \$200.00
 Due Date: March 4, 2014

**** Late fees will be charged if not paid by due date ****

Property Address:
206 GOODRICH AVE

Ref. # 120910
Folder RSN: 3667236

Date	Type of Fee	Amount
November 15, 2013	CO Residential 1 & 2 Units Initial Fee	\$200.00

PAY THIS AMOUNT: \$200.00


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: \$200.00

Customer #: 1403938 Ref. #: 120910 Folder RSN : 3667236

<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								