



**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

ABRA AUTO BODY
 1190 UNIVERSITY AVE W
 ST PAUL MN 55104

Bill Date: April 2, 2012
 Customer #: 641964

Amount Due: \$230.41
 Due Date: May 2, 2012

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

Property Address:
1190 UNIVERSITY AVE W

Ref. # 50547
Folder RSN: 3055596

Date	Type of Fee	Amount
February 28, 2012	CO Commercial Initial Fee	\$230.41

PAY THIS AMOUNT: \$230.41

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: \$230.41

Customer #: 641964 Ref. #: 50547 Folder RSN : 3055596

<input type="checkbox"/> American Express	<input type="checkbox"/> Discover	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	Expiration Date: Month / Year				
Enter Account Number								