



**Fire Certificate of Occupancy  
Fee Invoice**

**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

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

DAVID L KROENING TERRI L KROENING  
 3324 DANS DRIVE  
 STEVENS POINT WI 54481

Bill Date: December 1, 2017  
 Customer #: 941646  
 Amount Due: \$484.00  
 Due Date: January 1, 2018

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

**Property Address:**  
 1119 LANE PLACE

**Ref.# 105992**  
**Folder RSN: 3674018**

Date	Type of Fee	Amount
October 11, 2017	CO Residential 1 & 2 Units Initial Fee	\$242.00
November 27, 2017	CO Residential 1&2 Unit Reinspection Fee	\$121.00
November 29, 2017	CO Residential 1&2 Unit Reinspection Fee	\$121.00

**PAY THIS AMOUNT: \$484.00**

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: \$484.00**

Customer #: 941646

Ref. #: 105992

Folder RSN : 3674018

<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								