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

TENG YANG
1324 WILSON AVE
ST PAUL MN 55106-5552

Bill Date: July 5, 2017
Customer #: 1288020

Amount Due: $309.00
Due Date: August 5, 2017

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

Property Address:
1887 LACROSSE AVE

Ref.# 115825
Folder RSN: 3587869

Date	Type of Fee	Amount
April 7, 2017	CO Residential 1 & 2 Units Initial Fee	$206.00
July 3, 2017	CO Residential 1&2 Unit Reinspection Fee	$103.00

PAY THIS AMOUNT: $309.00

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: $309.00**

Customer #: 1288020 **Ref. #: 115825** **Folder RSN : 3587869**

☐ Amex ☐ MasterCard
☐ Discover ☐ Visa

Security Code

Expiration Date: Month / Year

Enter Account Number