



**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

MICHAEL S VOLK Joanna Volk
 4386 NYBRO CIRCLE
 EAGAN MN 55123-1742

Bill Date: August 12, 2011
 Customer #: 938850
 Amount Due: \$600.00
 Due Date: August 27, 2011

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. ****
Payment must be received in this office no later than August 27, 2011 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
1752 LAUREL AVE

Ref. # 107167
Folder RSN: 1580132

Date	Type of Fee	Amount
October 18, 2010	CO Residential 1 & 2 Units Initial Fee	\$200.00
January 10, 2011	CO Residential 1&2 Unit Reinspection Fee	\$100.00
February 15, 2011	CO Residential 1&2 Unit Reinspection Fee	\$100.00
March 25, 2011	CO Residential 1&2 Unit Reinspection Fee	\$100.00
July 12, 2011	CO Residential 1&2 Unit Reinspection Fee	\$100.00

PAY THIS AMOUNT: \$600.00

Mail to: Billing
375 Jackson St, Suite 220
Saint Paul Fire Inspection
Saint Paul, MN 55102-1806

Make Checks Payable to: City of St. Paul
**** Return this document with your payment ****

Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$600.00

Customer #: 938850

Ref. #: 107167

Folder RSN : 1580132

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