



**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

TRACER MANAGEMENT INC
 7101 GIRARD AVE N
 BROOKLYN CENTER MN 55430

Bill Date: March 14, 2011
 Customer #: 1194214

Amount Due: \$681.00
 Due Date: April 14, 2011

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

Property Address:
441 WHEELER ST N

Ref. # 11970
Folder RSN: 1383815

Date	Type of Fee	Amount
May 14, 2010	CO Residential 3+ Units Initial Fee	\$227.00
September 1, 2010	CO Residential 3+ Units Reinspection Fee	\$113.50
November 29, 2010	CO Residential 3+ Units Reinspection Fee	\$113.50
February 2, 2011	CO Residential 3+ Units Reinspection Fee	\$113.50
March 11, 2011	CO Residential 3+ Units Reinspection Fee	\$113.50

PAY THIS AMOUNT: \$681.00

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: \$681.00

Customer #: 1194214 Ref. #: 11970 Folder RSN : 1383815

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