



**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.

STEVEN L BERRES  
5627 PERKINS ST N  
OAK PARK HEIGHTS MN 55082- 6548

Bill Date: December 5, 2016  
Customer #: 1288582  
Amount Due: \$202.00  
Due Date: January 5, 2017

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

**Property Address:**  
1611 ARLINGTON AVE E

**Ref.# 123146**  
**Folder RSN: 4181967**

Date	Type of Fee	Amount
November 1, 2016	CO Residential 1 & 2 Units Initial Fee	\$202.00

**PAY THIS AMOUNT: \$202.00**

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: \$202.00**

Customer #: 1288582

Ref. #: 123146

Folder RSN : 4181967

<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								