



**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

AIHOA TRAN THOMAS HUYNH
 3007 VALENTO LANE
 LITTLE CANADA MN 55117-5547

Bill Date: May 3, 2012
 Customer #: 1213321

Amount Due: \$340.00
 Due Date: June 3, 2012

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

Property Address:
1694 AMES AVE

Ref. # 111638
Folder RSN: 1603955

Date	Type of Fee	Amount
January 17, 2012	CO Residential 1 & 2 Units Initial Fee	\$170.00
April 10, 2012	CO Residential 1&2 Unit Reinspection Fee	\$85.00
May 2, 2012	CO Residential 1&2 Unit Reinspection Fee	\$85.00

PAY THIS AMOUNT: \$340.00

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: \$340.00

Customer #: 1213321 Ref. #: 111638 Folder RSN : 1603955

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