



SAINT PAUL
SAFETY & INSPECTIONS

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)
ANGIE WIESE, PE(MN), CBO, DIRECTOR

375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
Tel: 651-266-8989 | Fax: 651-266-9124

September 16, 2022

Juan D Moreno/Prescila Moreno
701 York Ave
St Paul MN 55106-3727

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701 York Ave
St Paul MN 55106-3727

Dear Juan D Moreno/Prescila Moreno and others, if listed:

On September 16, 2022, this department conducted an inspection of your property at **820 WESTERN AVE N** and because **you were not compliant with a previous order.**

Deficiency: "Three trailers have not been removed from the north side of the building."

YOU ARE BEING BILLED \$124.00 for the cost of this inspection. This is in accordance with Chapter 34.24 of the Saint Paul Legislative Code. Payment is due upon receipt of this letter. Make your check payable to the "City of Saint Paul" and mail your payment to:

Department of Safety and Inspections, Code Enforcement
Excessive Consumption Unit
375 Jackson Street, Suite 220
St. Paul, MN 55101-1806

If you do not pay within 30 days, the amount of this bill, plus administrative costs, will be assessed to your property taxes.

NOTICE

Your property is scheduled for a REINSPECTION on **September 23, 2022.**

****WARNING****

IF YOU DO NOT HAVE THE VIOLATION(S) CORRECTED BY THE NEXT INSPECTION DATE, September 23, 2022, YOU WILL BE BILLED AN ADDITIONAL \$124.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Richard Kedrowski, 651-266-9141

Richard Kedrowski
Code Enforcement Inspector

City of Saint Paul, Department of Department of Safety and Inspections

September 16, 2022

EXCESSIVE CONSUMPTION

Invoice #: 1687230

File #: 21-316762

Property Address: 820 WESTERN AVE N

Property PIN: 252923430018

Owner Name: Juan D Moreno/Prescila Moreno

Fee Description

Amount

Excessive Consumption (Non Compliance)

\$ 124.00

Payment is due upon receipt of this letter. **Failure to pay within 30 days will result in the amount due assessed to your property taxes.** Make your check payable to the City of Saint Paul.

Send payment to: Department of Safety and Inspections
Excessive Consumption Unit
375 Jackson Street, Suite 220
St. Paul, MN 55101-1806

Keep this portion for your records:

Date Paid: _____ Amount Paid: \$ _____ Check or Money Order #: _____

---[]---[]---[]---[]---**CUT HERE**---[]---[]---[]---[]---

*****RETURN THIS PORTION WITH YOUR PAYMENT*****

City of Saint Paul, Department of Department of Safety and Inspections, Code Enforcement Division

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