

CITY OF SAINT PAUL

Christopher B. Coleman, Mayor

375 Jackson Street., Suite 220 Saint Paul, MN 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-1919 Web: www.stpaul.gov/dsi

April 13, 2011

325

Quality Residences Llc 923 Payne Ave St Paul MN 55130-4001

Dear Quality Residences Llc, and others, if listed:

On April 12, 2011, this department conducted an inspection of your property at **668 4TH ST E** and because **this** is your fifth or more violation within a **12 month period**

Deficiency: Garbage, rubbish, trash, or other sanitation issues at the property. (containers, storage, garbage hauler, etc.)

YOU ARE BEING BILLED <u>\$150.00</u> 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 next scheduled for a REINSPECTION on

April 17, 2011

WARNING

IF YOU HAVE AN ADDITIONAL VIOLATION WITHIN 12 MONTHS YOU WILL BE BILLED AN ADDITIONAL \$150.00 . CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Ed Smith, at 651-266-1917

Ed Smith
Code Enforcement Inspector

ec60169 6/10

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

April 13, 2011

EXCESSIVE CONSUMPTION INVOICE # 900187

File #: 11-115736

Property Address: 668 4TH ST E Property PIN: 322922420032

Owner Name: Quality Residences Llc Fee Description Amount \$ 150.00 Excessive Consumption Multiple \$150 Fee Payment is due upon receipt of this letter. Failure to pay within 30 days will result in this amount being assessed to your property taxes. Make your check payable to the ACity of Saint Paul@. Send payment to: Department of Safety and Inspections **Excessive Consumption Unit** 375 Jackson Street, Suite 220 St. Paul. MN 55101-1806 Date Paid: _____Amt Paid: ____ Keep this portion for your records: Ck or M.O. # 325 Deficiency: Garbage, rubbish, trash, or other sanitation issues at the property. (containers, storage, garbage hauler, etc.) \leftrightarrow - -- Cut HERE -- \leftrightarrow - -- \leftrightarrow - Cut HERE - \leftrightarrow - -- \leftrightarrow - -- Cut HERE --- \leftrightarrow **RETURN** this portion with your payment City of Saint Paul, Department of Department of Safety and Inspections, Code Enforcement Division

EXCESSIVE CONSUMPTION PAYMENT

INVOICE # 900187 dated April 13, 2011

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RETURN THIS PORTION WITH YOUR PAYMENT