

Fire Certificate of Occupancy Fee Invoice

* * FINAL NOTICE * *

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

Kyle Erdmann 257 JAN DRIVE HARLEYSVILLE PA 19438 Bill Date: November 25, 2011

Customer #: 1289379

Amount Due: \$1,090.00 Due Date: December 10, 2011

* You were sent a Fire Inspection Fee Invoice and payment has not been received. * * Payment must be received in this office no later than December 10, 2011 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address: Ref. # 14597 431 LYNNHURST AVE W Folder RSN: 1194722

Date	Type of Fee	Amount		
October 12, 2010	CO Residential 3+ Units Initial Fee	\$218.00		
October 28, 2010	CO Residential 3+ Units Reinspection Fee	\$109.00		
December 7, 2010	CO Residential 3+ Units Reinspection Fee	\$109.00		
December 27, 2010	CO Residential 3+ Units Reinspection Fee	\$109.00		
March 8, 2011	CO Residential 3+ Units Reinspection Fee	\$109.00		
April 29, 2011	CO Residential 3+ Units Reinspection Fee	\$109.00		
May 17, 2011	CO Residential 3+ Units Reinspection Fee	\$109.00		
September 29, 2011	CO Residential 3+ Units Reinspection Fee	\$109.00		
October 25, 2011	CO Residential 3+ Units Reinspection Fee	\$109.00		

PAY THIS AMOUNT: \$1,090.00

Mail to: Billing

375 Jackson St, Suite 220 Saint Paul Fire Inspection Saint Paul, MN 55102-1806 Make Checks Payable to: City of St. Paul

** Return this document with your payment **

Saint I aui, Will 55.	102-1000							
Signature of Cardholder	(required for all charg	ges):						
IF PAYING BY CREDIT CARI Customer #: 1289379	D PLEASE COMPLETE T Ref. #: 14597		ORMATI	·	nount:	\$1,090	0.00	
American Express Enter Account Number	☐ Discover ☐	MasterCard _] Visa	Expiration Date: Month / Year				