

CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
General Information: 651-266-8989
Fax: 651-266-9124
Visit our web site: www.stpaul.gov/dsi

FOLDER #
(for office use only)

VACANT BUILDING \$5,000.00 PERFORMANCE DEPOSIT

DATE_11/16/2012	
VACANT BUILDING ADDRESS 1009 White Bear	Avenue North Saint Paul MN
DEDOCITOD'S MAME DALLE	Taut, Will
DEPOSITOR'S ADDRESS 1112 Price Avenue	
CITY_ColumbiaSTATE_SC	ZIP CODE29201
DAYTIME PHONE(803) 929-1117	FAX NUMBER <u>(803) 765-9931</u>
When your project is completed and approved, your \$5,000.00 p. I understand that all items listed on the inspection report must be Building), a \$5,000.00 performance deposit (cash or bond) must	erformance deposit plus interest will be refunded to you. corrected within six (6) months and where applicable (Category 3
additional six (6) months to complete project if work is proce unforeseen conditions have had a significant schedule impact	
I also understand that this property shall <u>not</u> be occupied until all obtained.	
Please indicate below the address your Refund Check should be s NAME_Ted Reis	Please make check payable to the following
ADDRESS_ 8124 Clifford Circ	sle
CITY Inner Grove Heights STATE N	MN ZIP 55076
Signature of Cardholder (required for all charges):	
IF PAYING BY CREDIT CARD PLEASE COMPL WISA American Express	ETE THE FOLLOWING INFORMATION: Discover MasterCard Visa
Expiration Date: Account Number:	Amount: \$