



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

DEISE CAPITAL LLC C/O AL CONARD
103 WILDWOOD BEACH RD
MAHTOMEDI MN 55115-1670

Bill Date: August 13, 2012
Customer #: 1280636
Amount Due: \$128.00
Due Date: August 28, 2012

**** You were sent a Fire Inspection Fee Invoice and payment has not been received. ****
Payment must be received in this office no later than August 28, 2012 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address:
1235 ALBEMARLE ST

Ref. # 109733
Folder RSN: 1474163

Date	Type of Fee	Amount
August 7, 2009	CO Residential 1 & 2 Units Initial Fee	\$128.00

PAY THIS AMOUNT: \$128.00

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 ****

Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$128.00

Customer #: 1280636 Ref. #: 109733 Folder RSN : 1474163

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