



# 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

Gwynne L Evans  
1405 Summit Ave  
St Paul MN 55105-2240

Bill Date: October 22, 2012  
Customer #: 223240  
Amount Due: \$314.00  
Due Date: November 6, 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 November 6, 2012 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

**Property Address:**  
**1986 ST CLAIR AVE**

**Ref. # 14873**  
**Folder RSN: 3387887**

Date	Type of Fee	Amount
July 19, 2012	CO Residential 3+ Units Initial Fee	\$254.00
August 21, 2012	CO Residential 3+ Units No Entry Penalty Fee	\$60.00

**PAY THIS AMOUNT: \$314.00**

**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: \$314.00**

**Customer #: 223240**

**Ref. #: 14873**

**Folder RSN : 3387887**

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