



**Fire Certificate of Occupancy  
Fee Invoice**

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

PIPER RENTALS LLC  
 6873 IDEAL AVE N  
 MAHTOMEDI MN 55115-2204

Bill Date: January 14, 2013  
 Customer #: 1201428

Amount Due: \$200.00  
 Due Date: February 14, 2013

**\*\* Late fees will be charged if not paid by due date \*\***

**Property Address:**  
**1060 VIRGINIA ST**

**Ref. # 105809**  
**Folder RSN: 1859993**

| Date             | Type of Fee                            | Amount   |
|------------------|--|----------|
| January 10, 2013 | CO Residential 1 & 2 Units Initial Fee | \$200.00 |

**PAY THIS AMOUNT: \$200.00**

Mail to: Billing  
 Saint Paul Fire Inspection  
 375 Jackson Street, Suite 220  
 St. Paul, MN 55102-1806

Make Checks Payable to: City of St. Paul  
**\*\* Return this document with payment \*\***

**Signature of Cardholder (required for all charges):** \_\_\_\_\_

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$200.00

Customer #: 1201428 Ref. #: 105809 Folder RSN : 1859993

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