

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

MARJORIE E MANGINE 8687 28TH ST N LAKE ELMO MN 55042-9435 Bill Date: August 5, 2013 Customer #: 1327996

Amount Due: \$540.00

Due Date: September 5, 2013

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

Property Address: Ref. # 116135 1465 WHITE BEAR AVE N Folder RSN: 3015234

| Date | Type of Fee | Amount | | |
|-------------------|--|----------|--|--|
| October 26, 2010 | Provisional CO Fee 2010 | \$50.00 | | |
| January 27, 2011 | Provisional CO Fee 2011 | \$50.00 | | |
| February 24, 2012 | Provisional CO Fee 2012 | \$50.00 | | |
| February 20, 2013 | Provisional CO Fee 2013 | \$50.00 | | |
| April 24, 2013 | CO Residential 1 & 2 Units Initial Fee | \$170.00 | | |
| June 12, 2013 | CO Residential 1&2 Unit Reinspection Fee | \$85.00 | | |
| August 1, 2013 | CO Residential 1&2 Unit Reinspection Fee | \$85.00 | | |

PAY THIS AMOUNT: \$540.00

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: \$540.00 Customer #: 1327996 Ref. #: 116135 Folder RSN : 3015234 | | | | | | | | | | |
| American Express Enter Account | Discover | MasterCard Visa | Expiration Date: Month / Year | | | | | | | |