

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

DELTA HOUSE PROPERTIES LLC 1245 MINNEHAHA AVE E SAINT PAUL MN 55106-4732 Bill Date: July 16, 2013 Customer #: 1384945

Amount Due: \$220.00

Due Date: August 16, 2013

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

Property Address: 663 5TH ST E UNIT A

Ref. #

118187

Folder RSN: 3367196

DateFebruary 20, 2013
June 10, 2013

Type of FeeProvisional CO Fee 2013

Amount \$50.00

CO Residential 1 & 2 Units Initial Fee

\$170.00

PAY THIS AMOUNT:

\$220.00

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: \$220.00 Customer #: 1384945 Ref. #: 118187 Folder RSN : 3367196												
American Ex	xpress	D	iscover		Maste	erCard	ı [Visa	Expirat Month	ion Date: / Year		
Enter Account Number												



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Amount Due: \$220.00

Due Date: August 16, 2013

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

Property Address: 663 5TH ST E UNIT B

Ref. #

118188

Folder RSN: 3367197

DateFebruary 20, 2013
June 10, 2013

Type of Fee

Amount

Provisional CO Fee 2013 CO Residential 1 & 2 Units Initial Fee \$50.00 \$170.00

PAY THIS AMOUNT:

\$220.00

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

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F PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION: Pay this Amount: \$220.00 Customer #: 1384945 Ref. #: 118188 Folder RSN: 3367197									
American Express	☐ Discover ☐	MasterCard Visa	Expiration Date: Month / Year						
Enter Account Number									