



# Fire Certificate of Occupancy

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

ANTHONY HAIDER SR ANTHONY HAIDER JR  
8845 27TH ST N  
LAKE ELMO MN 55402- 8440

Bill Date: October 22, 2014  
Customer #: 945526

Amount Due: \$170.00  
Due Date: November 22, 2014

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

**Property Address:**  
1919 RANDOLPH AVE

**Ref.# 103555**  
**Folder RSN: 2610346**

Date	Type of Fee	Amount
October 20, 2014	CO Residential 1 & 2 Units Initial Fee	\$170.00

**PAY THIS AMOUNT: \$170.00**

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: \$170.00**

Customer #: 945526

Ref. #: 103555

Folder RSN : 2610346

<input type="checkbox"/> Amex	<input type="checkbox"/> MasterCard			Expiration Date: Month / Year				
<input type="checkbox"/> Discover	<input type="checkbox"/> Visa	Security Code						
Enter Account Number								