

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

KAIZEN PROPERTY SOLUTIONS LLC P.O. BOX 48223 MINNEAPOLIS MN 55448 Bill Date: December 24, 2014

Customer #: 1431858

Amount Due: \$657.50 Due Date: January 8, 2015

* * You were sent a Fire Inspection Fee Invoice and payment has not been received. * * Payment must be received in this office no later than January 8, 2015 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

Property Address: Ref. # 12024

1952 MARYLAND AVE E Folder RSN: 3282023

| Date | Type of Fee | Amount | | |
|--------------------|--|----------|--|--|
| July 16, 2014 | CO Residential 3+ Units Initial Fee | \$263.00 | | |
| September 24, 2014 | CO Residential 3+ Units Reinspection Fee | \$131.50 | | |
| October 17, 2014 | CO Residential 3+ Units Reinspection Fee | \$131.50 | | |
| November 20, 2014 | CO Residential 3+ Units Reinspection Fee | \$131.50 | | |

PAY THIS AMOUNT: \$657.50

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 Cardholde | er (required 1 | for all charges): | | | | | | | - |
|---|------------------|---|--------------------------|--------------------------|--------------------------------|--------|---------|----|-------|
| IF PAYING BY CREDIT CA Customer #: 1431858 | | OMPLETE THE F : 12024 | | NFORMATI der RSN : 32 | | nount: | \$657.5 | 50 | |
| | asterCard isa | 4 Digit Verification Number Security Code: | Visa, MasterCard, Diacov | 907 907 | Expiration Date: Month / Year | | | | |
| Enter Account Number | | | | | | | | | |