## Department of Safety & Inspections

Ricardo X. Cervantes, Director

CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806

Telephone: 651-266-8989 Facsimile: 651-266-9124 www.stpaul.gov/dsi

7/2/15

Dear:

On a Notice was mailed to you of the violation, listed below. The Notice ordered you to abate the violation prior to the reinspection date of . On, or after, that reinspection date the property was reinspected and the following condition was not abated.

The St. Paul Legislative Code, Chapter 34.24, authorizes the city to collect fees for inspection services when the property owner has not abated the violations by the date given in the Summary Abatement Order. In order to recover the city cost for the reinspection on , you are hereby billed \$120.00 for Excessive Consumption of City Services.

Please make your check payable to the "City of Saint Paul" and mail your payment to:

Department of Safety and Inspections, Code Enforcement Excessive Consumption Unit 375 Jackson Street, Suite 220 St. Paul, MN 55101-1806

Payment is due upon receipt of this letter. If payment is not received within 30 days of this letter, administrative costs will be added to the cost of this bill and the entire amount will be assessed to your property taxes.

Code Enforcement Inspector

## City of Saint Paul, Department of Safety and Inspections 7/2/15

## EXCESSIVE CONSUMPTION INVOICE #

File #: Property Addres Property PIN: Owner Name:	
<del></del>	<u>Amount</u> 5120.00
Payment is due upon receipt of this letter Failure to pay within 30 days will result in th	is amount being assessed to your property taxes
Make your check payable to the City of Sair Send payment to: Department of Saf Excessive Consum 375 Jackson Street St. Paul, MN 5510	ety and Inspections ption Unit ;, Suite 220
Keep this portion for your records: Date  Ck OR M	Paid: Amt Paid:
·····Cut HERE ····· Cut HER	RE ·····Cut HERE ·····
RETURN this portion with your paym	nent
City of Saint Paul, Department of Safety and EXCESSIVE CONSUMPTION PAYMENT	d Inspections, Code Enforcement Division
Folder #: INVOICE # Dated	
Property Address: Property PIN:	
Owner Name:	