



**Fire Certificate of Occupancy
Fee Invoice**

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

Check this box if making any name or mailing address corrections.

ROBERT SCHILLING
 1085 REANEY AVE
 ST PAUL MN 55106- 3918

Bill Date: September 8, 2015
 Customer #: 301385
 Amount Due: \$436.00
 Due Date: October 8, 2015

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

Property Address:
 823 LAUREL AVE

Ref.# 11477
Folder RSN: 3365792

Date	Type of Fee	Amount
November 27, 2012	CO Residential 3+ Units Initial Fee	\$218.00
March 14, 2013	CO Residential 3+ Units Reinspection Fee	\$109.00
September 4, 2015	CO Residential 3+ Units Reinspection Fee	\$109.00

PAY THIS AMOUNT: \$436.00

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: \$436.00

Customer #: 301385

Ref. #: 11477

Folder RSN : 3365792

<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								