

Fire Certificate of Occupancy Fee Invoice

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

CITY OF SAINT PAUL

An Equal Opportunity Employer

Department of Safety and Inspections 375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 PHONE: (651) 266-8989 FAX: (651) 266-9124

RUTHELLE WEST 916 HAGUE AVE ST PAUL MN 55104-6516 Bill Date: June 17, 2016 Customer #: 949070

Amount Due: \$237.00 Due Date: July 17, 2016

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

Property Address: 991 DAYTON AVE

Ref.# 108763

Folder RSN: 3037859

DateType of FeeAmountMay 24, 2016CO Residential 1 & 2 Units Initial Fee\$237.00

PAY THIS AMOUNT: \$237.00

Mail to: Billing Saint Paul Fire Inspection 375 Jackson Street, Suite 220 St. Paul, MN 55101-1806 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 INFORMA	ATION: Pay this Amount: \$237.00
Customer #: 949070 Ref. #: 108763	Folder RSN : 3037859
☐ Amex ☐ MasterCard ☐ Discover ☐ Visa	Expiration Date: Month / Year
Security Code	
Enter Account Number	