

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

JEFF A KEARNS 493 ST CLAIR AVE ST PAUL MN 55102-3121 Bill Date: October 19, 2017

Customer #: 939955

Amount Due: \$206.00

Due Date: November 19, 2017

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

Property Address: 495 ST CLAIR AVE

Ref.# 102257

Folder RSN: 3454056

DateType of FeeAmountSeptember 19, 2017CO Residential 1 & 2 Units Initial Fee\$206.00

PAY THIS AMOUNT: \$206.00

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: \$206.00
Customer #: 939955 Ref. #: 102257	Folder RSN: 3454056
☐ Amex ☐ MasterCard ☐ Discover ☐ Visa Security Code ☐ ☐	Expiration Date: Month / Year
Enter Account Number	