



# Fire Certificate of Occupancy

**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

**\*\* FINAL NOTICE \*\***

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

ABBIE FINGER  
 5305 26TH AVE S  
 MINNEAPOLIS MN 55417- 1923

Bill Date: September 17, 2018  
 Customer #: 1557637  
 Amount Due: \$242.00  
 Due Date: October 2, 2018

**\*\* You were sent a Fire Inspection Fee Invoice and payment has not been received. \*\***  
 Payment must be received in this office no later than October 2, 2018 or the fee invoice plus administrative costs will be submitted for assessment to your property tax.

**Property Address:**  
 819 AURORA AVE

**Ref.# 107978**  
**Folder RSN: 4253992**

Date	Type of Fee	Bill #	Amount
July 16, 2018	CO Residential 1 & 2 Units Initial Fee	1390329	\$242.00

## PAY THIS AMOUNT: \$242.00

You can pay this invoice online by going to [online.stpaul.gov](http://online.stpaul.gov) and selecting the 'Make a Payment' option. You will need your customer number and bill number to process a payment - both can be found on this invoice.

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 INFORMATION: Pay this Amount: \$242.00

Customer #: 1557637

Ref. #: 107978

Folder RSN : 4253992

<input type="checkbox"/> Amex	<input type="checkbox"/> MasterCard	  <small>4 Digit Verification Number</small> <small>3 Digit Verification Number</small>	Expiration Date:						
<input type="checkbox"/> Discover	<input type="checkbox"/> Visa		Security Code						
Enter Account Number									