

HEARING NOTIFICATION LISTING SERVICE - 594 BRUNSON ST

Legislative Hearing: Tuesday, September 26, 2023

Publication Dates: August 31 and September 4, 2023

City Council Hearing: Wednesday, November 1, 2023

| Owners, Interested Parties, etc.                                     | US Mail | CERTIFIED MAIL |                           | PERSONAL SERVICE |          | Resolution Mail Date | ENS Posting Date | OTA Mail Date |
|----------------------------------------------------------------------|---------|----------------|---------------------------|------------------|----------|----------------------|------------------|---------------|
|                                                                      |         | Sent           | Received                  | Sent             | Received |                      |                  |               |
| Sibet Renovations LLC<br>9950 Troy Ln N<br>Maple Grove MN 55311-1387 |         | 8/25/23        | Returned<br>Undeliverable |                  |          |                      |                  | 7/24/23       |
| Sibet Renovations LLC<br>21928 Durant St NE<br>East Bethel MN 55011  |         | 8/25/23        | Returned<br>Undeliverable |                  |          |                      |                  | 7/24/23       |
| Payne Phalen District 5 Planning Council                             |         |                |                           |                  |          |                      | 8/25/23          |               |

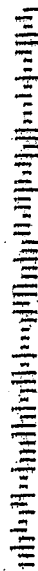
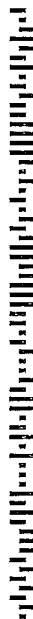


## DEPARTMENT OF SAFETY AND INSPECTIONS

--R-T-S- 553114057-1N 009 09/07/23

RETURN TO SENDER  
UNABLE TO FORWARD  
UNABLE TO FORWARD  
RETURN TO SENDER

Sibet Renovations LLC  
9950 Troy Ln N  
Maple Grove MN 55311-1387



**CERTIFIED MAIL**

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you..
- Attach this card to the back of the mailpiece, or on the front if space permits.

## Article Addressed to:

Sibet Renovations LLC  
9950 Troy Ln N  
Maple Grove MN 55311-1387



9590 9402 4439 8248 1229 46

**2. Article Number (Transfer from service label)**

4579 2270 0000 0203 2002

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X  
☐ Agent  
☐ Address

|                               |                     |
|-------------------------------|---------------------|
| B. Received by (Printed Name) | C. Date of Delivery |
|-------------------------------|---------------------|

D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☒ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

4. Mail Class

☐ First-Class Mail®

☐ First-Class Mail Restricted Delivery

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®

Restricted Delivery  
Gail Brunson

## Domestic Return Receipt

quodient  
FIRST-CLASS MAIL  
M!  
\$008.53  
08/25/2023 ZIP 55101  
043M31224113

US POSTAGE  
quadrant  
FIRST-CLASS MAIL  
PM  
\$008.53  
06/25/2023 ZIP 550101  
043M81224173

SAINT PAUL MN 55011  
25 AUG 2023 PM 2:11  
9081<10155  
1446-11033  
JMN



10155 Paid AS  
35-565  
1919 2170 0000 020E 2002



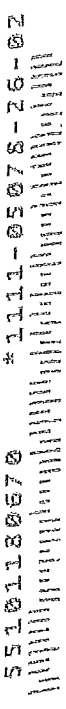
8-28  
9-27  
9-27

Sibet Renovations LLC  
21928 Durant St NE  
East Bethel MN 55011

2209/14/23 1 33 553 SIXIN

RETURN TO SENDER  
UNDELIVERED  
UNABLE TO FORWARD

9081<10155  
1446-11033  
JMN  
07908110155 :03



PS Form 3811, July 2015 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)  
7007 3020 0000 0177 6161



Sibet Renovations LLC  
21928 Durant St NE  
East Bethel MN 55011

1. Article Addressed to:  
■ Complete items 1, 2, and 3.  
■ Print your name and address on the reverse so that we can return the card to you.  
■ Attach this card to the back of the mailpiece, or on the front if space permits.

SENDER: COMPLETE THIS SECTION

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☒ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery  
☐ Signature Confirmation Restricted Delivery

A. Signature  
X  
B. Received by (Printed Name)  
C. Date of Delivery  
D. Is delivery address different from item 1? If YES, enter delivery address below: ☐ Yes ☐ No

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD DOTTED LINE