

HEARING NOTIFICATION LISTING SERVICE - 1043 BEECH ST

Legislative Hearing: **Tuesday, June 13, 2023**

Publication Dates: **May 18 and 22, 2023**

City Council Hearing: **Wednesday, July 19, 2023**

Owners, Interested Parties, etc.	US Mail	CERTIFIED MAIL		PERSONAL SERVICE		Resolution Mail Date	ENS Posting Date	OTA Mail Date
		Sent	Received	Sent	Received			
Diane E Martin (<i>deceased</i>) 1043 Beech St St Paul MN 55106-4602	5/12/23 <i>Returned</i>							3/22/23 <i>Returned</i>
St Paul Federal Credit Union 1330 Conway Street, Suite 200 St Paul, MN 55106		5/12/23						3/22/23
State of Minnesota Department of Revenue 600 Robert St N St Paul MN 55101		5/12/23	5/15/23					3/22/23
Angella Martin 800 Rice Street Apt 407 St Paul MN 55117		5/12/23						4/12/23
Joe Steinmaus Metro Holdings LLC 7279 40th St N Oakdale MN 55128		5/12/23	5/17/23					4/25/23
Dayton's Bluff Community Council							5/12/23	

375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806

SAINT PAUL MN 550

12 MAY 2023PM 3 L

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FIRST-CLASS MAIL

IMI

\$000.60

05/12/2023 ZIP 55101

0431061224113

US POSTAGE



CITY OF SAINT PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS

Received

MAY 19 2023

Public Hearing
Steve M.

Diane E Martin (deceased)
1043 Beech St
St Paul MN 55106-4602

City of Saint Paul - DSI

NIXIE 555 FE 1 0005/17/23

RETURN TO SENDER
ADDRESS NOT KNOWN
CITY OF SAINT PAUL

55106-4602 BC: 55101180070 *1011-02292-12-45
5510118006

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.

1. Article Addressed to:

State of Minnesota
 Department of Revenue
 600 Robert St N
 St Paul MN 55101



9590 9402 4439 8248 1227 00

2. Article Number (Transfer from service label)

7007 3020 0000 0177 5836

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

MAY 15 2023

MAILROOM

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Restricted Delivery

1043 Beach

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

Domestic Return Receipt

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.

1. Article Addressed to:

Joe Steinmaus
 Metro Holdings LLC
 7279 40th St N
 Oakdale MN 55128



9590 9402 4439 8248 1227 24

2. Article Number (Transfer from service label)

7007 3020 0000 0177 5850

COMPLETE THIS SECTION ON DELIVERY

A. Signature

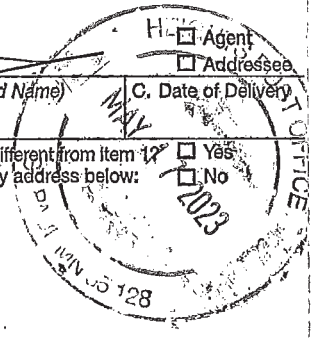
X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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



3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Restricted Delivery

1045 Beach

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

Domestic Return Receipt