

# APPLICATION / COMPLETION FORM LEAD SERVICE REPLACEMENT ASSESSMENT

(ONLY PROPERTIES WITHIN THE CITY LIMITS OF SAINT PAUL ARE ELIGIBLE.)

### REQUEST FOR ASSESSMENT

The work outlined in the Lead Service Replacement Program has been completed to my satisfaction. I request that Saint Paul Regional Water Services pay the attached invoice on my behalf and to assess the costs of this replacement against my property.

### ASSESSMENT ADMINISTRATION FEE

I understand I will be charged a one-time administration fee of \$80.00, which will be included in the cost assessed against my property.

### ASSESSMENT INTEREST RATE

I understand the interest charges will be based on the fixed rate approved by the Saint Paul City Council and is subject to change without notice.

### WAIVER OF MECHANIC'S LIEN RIGHTS

I understand that I must submit a Waiver of Mechanic's Lien Rights with this form. (Completed by plumbing contractor.)

### PAYBACK PERIOD

I understand that the assessment will be collected as part of the real estate taxes over a period of up to 20 years, pursuant to Program policy, and that I may prepay all or part of the unpaid balance, pursuant to prepayment criteria.

### WAIVER OF APPEAL

I waive my right to appeal this assessment.

Amount of Invoice \$ \$2,500

(Please Print)  
Property Owner's Name ANNA ROTH BLUMFIELD

Owner's Signature Anna Roth Blumfield

Telephone Number 651-280-0181

Property Address 441 OSCEOLA AVE S  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address  
M+B SERVICES  
27498 OLINDA TRL  
LINDSTROM, MN 55045

CIS #0671825

For Office Use Only

PIN: 112823140083

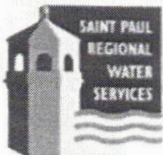
Amount:  
\$ 2,500.00

Payable to:  
(Contractor's Name and Address)

M+B SERVICES

27498 OLINDA TRL

LINDSTROM, MN 55045



Return this Application/Completion form, the Waiver and a copy of invoice to:

SPRWS Engineering Desk, 1900 Rice St., Saint Paul, MN 55113

Email: [Water-PlumbingPermitApp@ci.stpaul.mn.us](mailto:Water-PlumbingPermitApp@ci.stpaul.mn.us)

Call 651-266-6270 if you have questions.

**APPLICATION / COMPLETION FORM**  
**LEAD SERVICE REPLACEMENT ASSESSMENT**  
(ONLY PROPERTIES WITHIN THE CITY LIMITS OF SAINT PAUL ARE ELIGIBLE.)

**REQUEST FOR ASSESSMENT**

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**PAYBACK PERIOD**

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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$ 5,600  
(Please Print)  
Property Owner's Name Kacy mcgough  
Owner's Signature X Kacy Mcgough  
Telephone Number X 612-559-5585  
Property Address 687 Lincoln Ave  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address Commercial Utilities, Inc.  
1146 E 7th St.  
St. Paul, MN 55106

CIS #0163079

|  |   |
|--|---|
| <b>For Office Use Only</b>                     |   |
| PIN:   | <u>022823410188</u>   |
| Amount:  | \$ <u>5,600.00</u>  |
| Payable to:<br>(Contractor's Name and Address) | <u>COMMERCIAL UTILITIES</u><br><u>1146 E 7TH ST</u><br><u>ST PAUL, MN 55106</u> |

★ **IMPORTANT** ★



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Revised 4/5/21

OK to Pay - Rutger Krenz



# APPLICATION / COMPLETION FORM LEAD SERVICE REPLACEMENT ASSESSMENT (ONLY PROPERTIES WITHIN THE CITY LIMITS OF SAINT PAUL ARE ELIGIBLE.)

### REQUEST FOR ASSESSMENT

The work outlined in the Lead Service Replacement Program has been completed to my satisfaction. I request that Saint Paul Regional Water Services pay the attached invoice on my behalf and to assess the costs of this replacement against my property.

### ASSESSMENT ADMINISTRATION FEE

I understand I will be charged a one-time administration fee of \$90.00, which will be included in the cost assessed against my property.

### ASSESSMENT INTEREST RATE

I understand the interest charges will be based on the fixed rate approved by the Saint Paul City Council and is subject to change without notice.

### WAIVER OF MECHANIC'S LIEN RIGHTS

I understand that I must submit a Waiver of Mechanic's Lien Rights with this form. (Completed by plumbing contractor.)

### PAYBACK PERIOD

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### WAIVER OF APPEAL

I waive my right to appeal this assessment.

CIS #0163947

Amount of Invoice \$ 5,600

(Please Print)  
Property Owner's Name Kari Frank

Owner's Signature [Signature]

Telephone Number X (715) 821-1065

Property Address 781 Goodrich Ave  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address Commercial Utilities, Inc.  
1146 East 7th St.  
St. Paul, MN 55106

|  |                     |
|--|---------------------|
| <b>For Office Use Only</b>                     |                     |
| PIN:   | <u>022823420106</u> |
| Amount:  | <u>5,600.00</u>     |
| Payable to:<br>(Contractor's Name and Address) |                     |
| <u>COMMERCIAL UTILITIES</u>                    |                     |
| <u>1146 E 7TH ST</u>                           |                     |
| <u>ST PAUL, MN 55106</u>                       |                     |
|  |                     |
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Revised 4/5/21

OK to pay - Rutger Krenz

# APPLICATION / COMPLETION FORM LEAD SERVICE REPLACEMENT ASSESSMENT

(ONLY PROPERTIES WITHIN THE CITY LIMITS OF SAINT PAUL ARE ELIGIBLE.)

### REQUEST FOR ASSESSMENT

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### ASSESSMENT ADMINISTRATION FEE

I understand I will be charged a one-time administration fee of \$80.00, which will be included in the cost assessed against my property.

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### PAYBACK PERIOD

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### WAIVER OF APPEAL

I waive my right to appeal this assessment.

Amount of Invoice \$ 5200.00

(Please Print)  
Property Owner's Name Wen-Li Chen (Wenli Tesar)

Owner's Signature *Wenli Chen*

Telephone Number 612-806-9968

Property Address 1456 EDMUND AVE., SAINT PAUL,  
MN 55104, USA  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address M & B Services

27498 Olinda Tr

Lindstrom MN 55045

CIS #0121653

**For Office Use Only**

PIN: 342923240154

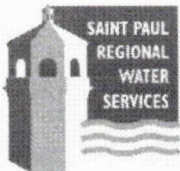
Amount:  
\$ 5,200.00

Payable to:  
(Contractor's Name and Address)

M&B SERVICES

27498 OLINDA TRL

LINDSTROM, MN 55045



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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$ 8355.00

(Please Print ) Property Owner's Name Jacek Radko

Owner's Signature 

Telephone Number 6128178847

Property Address 1976 Jefferson Ave St Paul , MN 55105  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print ) Contractor's Name and Address Triple E Water and Sewer  
5232 Hanson Ct N  
Crystal MN 55429

CIS #0194677

|  |
|--|
| <b>For Office Use Only</b>                                   |
| <b>PIN:</b> <u>092823230010</u>                              |
| <b>Amount:</b><br>\$ <u>8,355.00</u>                         |
| <b>Payable to:</b><br><b>(Contractor's Name and Address)</b> |
| <u>TRIPLE E WATER &amp; SEWER</u>                            |
| <u>5232 HANSON CT N</u>                                      |
| <u>CRYSTAL, MN 55429</u>                                     |
|  |
|  |



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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$ 5981  
 (Please Print) Property Owner's Name X William Kolf  
 Owner's Signature [Signature]  
 Telephone Number X 612-296-6866  
 Property Address 476 Summit Ave  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print) Contractor's Name and Address Commercial Utilities Inc.  
1146 East 7th St  
St. Paul, MN 55106

CIS #0000098

|   |
|---|
| For Office Use Only<br>PIN: <u>012823310167</u><br>Amount:<br>\$ <u>5,981.00</u><br>Payable to:<br>(Contractor's Name and Address)<br><u>COMMERCIAL UTILITIES</u><br><u>1146 E 7TH ST</u><br><u>ST PAUL, MN 55106</u> |
|---|

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Revised 4/5/21

OK to pay - Rutger Krenz

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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$ 2,800  
(Please Print)  
Property Owner's Name X Chad Cunningham  
Owner's Signature X Chad Cunningham  
Telephone Number X 517-980-1145  
Property Address 1120 Palace Ave  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address Commercial Utilities, Inc.  
1146 East 7th St  
St. Paul, MN 55106

CIS #0311136  
For Office Use Only  
PIN: 102823140126  
Amount:  
\$ 2,800  
Payable to:  
(Contractor's Name and Address)  
COMMERCIAL UTILITIES  
1146 E 7TH ST  
ST PAUL, MN 55106

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Email: Water-PlumbingPermitApp@ci.stpaul.mn.us  
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Revised 4/5/21

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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$ 5,949<sup>00</sup>

(Please Print)  
 Property Owner's Name X Kert Hranicka

Owner's Signature X [Signature]

Telephone Number X 651.307.6924

Property Address X 1655 Juno Ave, Saint Paul MN  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
 Contractor's Name and Address Commercial Utilities, Inc.  
1146 East 7th St.  
St-Paul, MN 55106

CIS #0292810

|  |                             |
|--|-----------------------------|
| <b>For Office Use Only</b>                     |                             |
| PIN:   | <u>092823410115</u>         |
| Amount:  | <u>\$ 5,949.00</u>          |
| Payable to:<br>(Contractor's Name and Address) | <u>COMMERCIAL UTILITIES</u> |
|  | <u>1146 E 7th St</u>        |
|  | <u>ST PAUL, MN 55106</u>    |
|  | <u> </u>                    |
|  | <u> </u>                    |

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Revised 4/5/21

Ok to pay - Rutger Krenz



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**ASSESSMENT ADMINISTRATION FEE**

I understand I will be charged a one-time administration fee of \$60.00, which will be included in the cost assessed against my property.

**ASSESSMENT INTEREST RATE**

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**WAIVER OF MECHANIC'S LIEN RIGHTS**

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**PAYBACK PERIOD**

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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of invoice \$ 5874

(Please Print)  
Property Owner's Name Xveronica kelly

Owner's Signature X [Signature]

Telephone Number X952-201-4755

Property Address X1416 Portland Ave.  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address Commercial Utilities  
1146 East 7th St.  
St. Paul, MN 55106

CIS #0409801

For Office Use Only

PIN: 032823240129

Amount:  
\$ 5874.00

Payable to:  
(Contractor's Name and Address)  
Commercial Utilities  
1146 E 7th St  
St Paul, MN 55106

**IMPORTANT**

Return this Application / Completion form, the Waiver form and a copy of invoice to:  
SPRWS Engineering Desk, 1900 Rice St., Saint Paul, MN 55113  
Fax: 651-266-6287 or Email: Water-PlumbingPermitApp@ci.stpaul.mn.us  
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**APPLICATION / COMPLETION FORM  
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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$ 5582  
 (Please Print)  
 Property Owner's Name X PATRICK CORNETTE Patrick Cornette  
 Owner's Signature X [Signature]  
 Telephone Number X 651-334-4218  
 Property Address X 2123 HARTFORD AVE 2123 Hartford Ave  
 (Only properties within the city limits of Saint Paul are eligible.)  
55116

(Please Print)  
 Contractor's Name and Address Commercial Utilities, Inc.  
1146 East 7th St.  
St. Paul, MN 55106

**For Office Use Only**

CIS# 0198653

PN: 082803410165

Amount:  
 \$ 5,582.00

Payable to:  
 (Contractor's Name and Address)  
Commercial Utilities  
1146 E 7th St  
St Paul MN 55106

**IMPORTANT**

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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of invoice \$ 6,635

(Please Print)  
Property Owner's Name X Brian Horst

Owner's Signature X [Signature]

Telephone Number X (320) 808-4183

Property Address 61 Dale St. North  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)  
Contractor's Name and Address Commercial Utilities, Inc.  
1146 East 7th St.  
St. Paul, MN 55106

CIS# 0003115  
For Office Use Only  
PIN: 02 28 23 14 0291  
Amount: \$ 6,635.00  
Payable to:  
(Contractor's Name and Address)  
Commercial Utilities  
1146 E 7th St  
St Paul MN 55106

**IMPORTANT**

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SPRWS Engineering Desk, 1900 Rice St., Saint Paul, MN 55113  
Fax: 651-266-6287 or Email: Water-PlumbingPermitApp@ci.stpaul.mn.us  
Call 651-266-6270 if you have questions.



**ASSESSMENT ADMINISTRATION FEE**

I understand I will be charged a one-time administration fee of \$80.00, which will be included in the cost assessed against my property.

**ASSESSMENT INTEREST RATE**

I understand the interest charges will be based on the fixed rate approved by the Saint Paul City Council and is subject to change without notice. The interest rate for 2021 is 2.25%.

**WAIVER OF MECHANIC'S LIEN RIGHTS**

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**WAIVER OF APPEAL**

I waive my right to appeal this assessment.

Amount of Invoice \$4500.00

(Please Print)

Property Owner's Name Liza Chigas

Owner's Signature [Signature]

Telephone Number 585-739-5492

Property Address 1192 Edgerton St. St Paul 55130  
(Only properties within the city limits of Saint Paul are eligible.)

(Please Print)

Contractor's Name and Address M & B Services

2038 Ford Parkway #222

St. Paul 55116

CIS #0058303

For Office Use Only

PIN: 292922120100

Amount: \$4,500.00

Payable to:  
(Contractor's Name and Address)

M&B Services

27498 Olinda Trl

Lindstrom, MN 55045



SPRWS Engineering Desk, 1900 Rice St., Saint Paul, MN 55113

Email: [Water-Lead-Replacements@stpaul.gov](mailto:Water-Lead-Replacements@stpaul.gov)

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OK to pay - Rutger Krenz