



**SAINT PAUL**  
SAFETY & INSPECTIONS

DEPARTMENT OF SAFETY & INSPECTIONS (DSI)  
ANGIE WIESE, PE(MN), CBO, DIRECTOR

375 Jackson Street, Suite 220  
Saint Paul, MN 55101-1806  
Tel: 651-266-8989 | Fax: 651-266-9124

December 14, 2023

Brenda Young  
66 Cook Ave W  
St Paul MN 55117-4929

Dear Brenda Young and others, if listed:

On December 14, 2023, this department conducted an inspection of your property at **66 COOK AVE W** and because **you were not compliant with a previous order.**

**Deficiency: "Non-compliant vehicle at the rear of the property."**

**YOU ARE BEING BILLED \$134**, for the cost of this inspection. This is in accordance with Chapter 34.24 of the Saint Paul Legislative Code. Payment is due upon receipt of this letter. Make your check payable to the "City of Saint Paul" and mail your payment to:

Department of Safety and Inspections, Code Enforcement  
Excessive Consumption Unit  
375 Jackson Street, Suite 220  
St. Paul, MN 55101-1806

**If you do not pay within 30 days, the amount of this bill, plus administrative costs, will be assessed to your property taxes.**

### **NOTICE**

Your property is scheduled for a REINSPECTION on **December 27, 2023.**

#### **\*\*WARNING\*\***

**IF YOU DO NOT HAVE THE VIOLATION(S) CORRECTED BY THE NEXT INSPECTION DATE, December 27, 2023, YOU WILL BE BILLED AN ADDITIONAL \$134.00. CALL THE INSPECTOR IF YOU HAVE ANY QUESTIONS: Richard Kedrowski, 651-266-9141**

Richard Kedrowski  
Code Enforcement Inspector

**City of Saint Paul, Department of Department of Safety and Inspections**

December 14, 2023

**EXCESSIVE CONSUMPTION**

Invoice #: 1802747

File #: 23-016832

Property Address: 66 COOK AVE W

Property PIN: 302922230080

Owner Name: Brenda Young

**Fee Description**

**Amount**

Excessive Consumption (Non Compliance)

\$ 134

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Send payment to: Department of Safety and Inspections  
Excessive Consumption Unit  
375 Jackson Street, Suite 220  
St. Paul, MN 55101-1806

Keep this portion for your records:

Date Paid: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Check or Money Order #: \_\_\_\_\_

---[ ]-----[ ]-----[ ]-----**CUT HERE**-----[ ]-----[ ]-----[ ]-----

**\*\*\*RETURN THIS PORTION WITH YOUR PAYMENT\*\*\***

**City of Saint Paul, Department of Department of Safety and Inspections, Code Enforcement Division**

**EXCESSIVE CONSUMPTION PAYMENT**

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