

Monroe County Department of Public Health
 111 Westfall Road, Room 828
 Rochester, NY 14620
 (585) 753-5571

INVOICE

Date	Invoice #	Due Date
10/28/2018	TR2018-0060	

Bill To
DANIEL HOFFMAN BROWNCROFT DAY NURSERY 933 ATLANTIC AVENUE ROCHESTER, NY 14609

Invoice For Facility
BROWNCROFT DAY NURSERY 933 ATLANTIC AVENUE ROCHESTER, NY 14609

Permit Renewal Fee	Amount
2018 Daycare Food Service Inspection Fee \$250	\$250.00
PLAN REVIEW FEE	\$75.00
Total: \$325.00	

Failure to remit payment by the due date will result in a late fee added to your balance due.
 Late fees are \$50 if your balance due is \$100 or more; or \$25 if your balance due is under \$100.

TO PROPERLY CREDIT YOUR ACCOUNT, PLEASE SEND IN THIS PAYMENT SLIP WITH YOUR PAYMENT
PAY ONLINE: <https://ehpermits.monroecounty.gov/pay> QUESTIONS/PAY BY PHONE: (585) 753-5571
Make checks payable to: Monroe County Department of Public Health

Facility: BROWNCROFT DAY NURSERY
 FAC #: 27DCC16
 Invoice #: TR2018-0060

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 BROWNCROFT DAY NURSERY
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Total: \$325.00