

## CITY OF JONESBORO

### Code Enforcement

Request For Invoice

Date: 7-21-2020

To: Tosha Moss

Property Address: 2009 Clark Parcel # 01-144272-07800  
Jonesboro, AR 72401

Need to send the following charges to this person.

Property Owner: Ann House  
7417 Braemar Ter  
Colleyville, Tx 76034-7330

<u>ITEMS</u>	<u>AMOUNTS</u>
Mowing & Clean up	\$ 160.00
Admin Fee	\$ 100.00
Filing Fee	\$ 15.00
<hr/>	
Total	\$ 275.00

Thank you,

Michael McQuay  
Jonesboro Police Department  
Code Enforcement Division  
PO Box 1845  
Jonesboro, AR 72403



Office of Code Enforcement  
P.O. Box 1845, Jonesboro, AR 72403

870-933-4658

AFFIDAVIT

Ann House  
7417 Braemar  
Colleyville, TX 76034

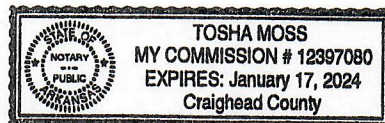
RE: 2009 Clark, Jonesboro, AR 72401

I, Michael Tyner, a Code Enforcement Officer, being duly sworn upon oath, that I served the attached notice(s) upon each of the persons or firms therein addressed, by depositing copies thereof in the United States Mail, enclosed within envelopes plainly addressed, as shown with postage fully prepaid, at the Jonesboro, Arkansas Post Office located at 310 East Street, Suite A., before 3:00 P.M., on the 7 day of July 2020.

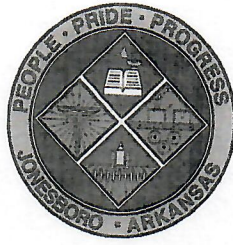
Michael Tyner  
Michael Tyner  
Jonesboro Code Enforcement

Subscribed and sworn to before me the 7 day of July 2020.

Tosha Moss  
Notary Public



My commission expires: Jan 17, 2024



**CITY OF JONESBORO  
CODE ENFORCEMENT**

DATE: 07/06/2020

TO: Ann House  
7417 BRAEMAR  
Colleyville, TX 76034

In regards to property located at 2009 CLARK  
JONESBORO, AR 72401.

Our records show that you own the property listed above. We have observed that the PROPERTY HAS OVERGROWN GRASS AND WEEDS WHICH MUST BE MOWED. We are sending this letter and are allowing you the chance to correct the violation that is mentioned below by JULY 17TH, 2020. If the issue is not corrected by the date listed, the City will HIRE A CONTRACTOR TO MOW AND TRIM THE PROPERTY, and place a lien on your property. Please call the Code Enforcement Office at (870) 933-4658 if you have any questions. If you would like to view the ordinance in violation online, they are available on City Clerk section of [www.jonesboro.org](http://www.jonesboro.org)

Section 1. Sec. 30-5 - Overgrown Grass, Weeds, Vines, or Low hanging Limbs  
2. Sec. 30-5 - Unsightly or Unsanitary Conditions

Cooley, David

Code Enforcement Officer

Cell 870-926-1404



**City of Jonesboro**  
Office of Code Enforcement  
P.O. Box 1845  
Jonesboro, AR 72403

ANN HOUSE  
7417 BRAEMAR  
COLLEYVILLE, TX 76034





7020 0090 0000 7686 2782

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Certified Mail Fee \$  
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☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Postage and Fees \$

Sent To Ann House  
 Street and Apt. No., or PO Box No. 7417 Braemar  
 City, State, ZIP+4® Colleyville, TX 76034

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark  
 JUL 07 2020

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p><b>ANN HOUSE</b>  <b>7417 BRAEMAR</b>  <b>COLLEYVILLE, TX 76034</b></p> <p>            9590 9402 5985 0062 5329 88</p> <p>2. Article Number (Transfer from service label)  <b>7020 0090 0000 7686 2782</b></p>	<p>A. Signature  <b>X</b></p> <p><input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>HL 004-CD-19</u> C. Date of Delivery <u>7-11-20</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table border="0"> <tr> <td> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)               </td> <td> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery               </td> </tr> </table>	<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		

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

2009 Clark Domestic Return Receipt



Office of Code Enforcement  
P.O. Box 1845, Jonesboro, AR 72403

870-933-4658

AFFIDAVIT

Ann House  
7417 Braemar  
Colleyville, TX 76034-7330

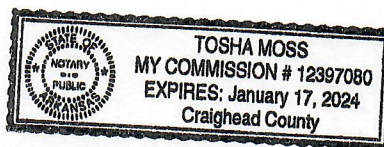
RE: 2009 Clark, Jonesboro, AR 72401

I, Michael Tyner, a Code Enforcement Officer, being duly sworn upon oath, that I served the attached notice(s) upon each of the persons or firms therein addressed, by depositing copies thereof in the United States Mail, enclosed within envelopes plainly addressed, as shown with postage fully prepaid, at the Jonesboro, Arkansas Post Office located at 310 East Street, Suite A., before 3:00 P.M., on the 30 day of July, 2020.

Michael Tyner  
Michael Tyner  
Jonesboro Code Enforcement

Subscribed and sworn to before me the 30 day of July, 2020.

Tosha Moss  
Notary Public



My commission expires: Jan. 17, 2024





DATE	INVOICE NO
7/21/2020	0063698

<b>BILL TO</b>
Ann House 7417 Braemar Colleyville, TX 76034-7330

						DUE DATE
						7/31/2020
DESCRIPTION	QUANTITY	EFFECTIVE RATE	AMOUNT	DISCOUNT	CREDIT	BALANCE
PREVIOUS OUTSTANDING BALANCE						155.00
July 2020 Code Enforcement Charges Parcel #01-144272-07800:						
Filing Fee- 2009 Clark	1.00	15.00	15.00	0.00	0.00	15.00
Admin. Fee- 2009 Clark	1.00	100.00	100.00	0.00	0.00	100.00
Mowing- 2009 Clark	1.00	160.00	160.00	0.00	0.00	160.00
INVOICE TOTAL:			275.00	0.00	0.00	275.00

If payment is not made within (30) days, the lien may be certified to Craighead County for collection on real estate taxes or City may pursue a judicial foreclosure in accordance with Ark. Code Ann. § 14-54-904.

  
Jonesboro Code Enforcement

PLEASE DETACH BOTTOM PORTION & REMIT WITH YOUR PAYMENT

For questions please contact us at (870) 932-3042

Customer Name: Ann House  
Customer No: 019520  
Account No: 0034926 - Mowing Acct 2009 Clark #01-144272-07800

DUE DATE	INVOICE NO
7/31/2020	0063698

Please remit payment by the due date to:

City of Jonesboro  
300 South Church Street  
PO Box 1845  
Jonesboro, AR 72403

Invoice Total: 275.00  
Discounts: 0.00  
Credit Applied: 0.00  
Ending Balance: 430.00

INVOICE BALANCE: \$275.00  
AMOUNT PAID: \_\_\_\_\_



**City of Jonesboro**  
Office of Code Enforcement  
P.O. Box 1845  
Jonesboro, AR 72403



*Ann House  
7417 Braemar  
Colleyville, TX 76034-7330*



7020 0090 0000 7686 1648


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Extra Services & Fees (check box; add fees as appropriate)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery  
Postage  
\$  
Total Postage and Fees  
\$  
Sent To *Ann House*  
Street and Apt. No. or PO Box No. *7417 Braemar* USPS  
City, State, ZIP+4® *Colleyville, TX 76034-7330*  
PS Form 3800, April 2015 PSN 7530-02-000-3047 See Reverse for Instructions

300 EAST ST 72407  
JUL 30 2020  
Postmark Here

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>Complete items 1, 2, and 3.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		<b>A. Signature</b> <input checked="" type="checkbox"/> <i>Ann - ch</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b> <i>Ann House</i> <i>7417 Braemar</i> <i>Colleyville, Tx 76034-7330</i>		<b>B. Received by (Printed Name)</b> <i>Ann</i>	<b>C. Date of Delivery</b>
 9590 9402 5989 0062 9654 47		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<b>2. Article Number (Transfer from service label)</b> 7020 0090 0000 7686 1648		<b>3. Service Type</b> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail <input type="checkbox"/> Mail Restricted Delivery (00) <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2015 PSN 7530-02-000-9053		<i>2009 clerk</i> Domestic Return Receipt	