



**APPLICATION FOR BUILDING PERMIT  
CITY OF ELKO NEW MARKET  
P.O. Box 99  
Elko New Market, MN 55020-0099  
Office: (952) 461-4777 / Fax: (952) 461-2782**

SITE ADDRESS: \_\_\_\_\_ PERMIT NO. \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_ PID: \_\_\_\_\_ Date: \_\_\_\_\_

ESTIMATED VALUE OF WORK (Include labor): \_\_\_\_\_ (omit cents)

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State License No.: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**WATER AND SEWER INFORMATION (New Construction)**

Plumber: \_\_\_\_\_ Registration #: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Installer: \_\_\_\_\_ Registration #: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Size of Service: Water \_\_\_\_\_ Sewer \_\_\_\_\_ Water Meter \_\_\_\_\_

Use of building: \_\_\_\_\_

Provide the following:
<input type="checkbox"/> 2 copies of Certified Land Survey
<input type="checkbox"/> 2 Copies of Building Plans 2 Copies of Erosion Control Plans
<input type="checkbox"/> 1 Copy of Energy Data
<input type="checkbox"/> 1 Copy of Heat Loss Data
<input type="checkbox"/> 1 Copy of Ventilation, Combustion Air
<input type="checkbox"/> Letter of Credit to cover cost of the site improvement. (Commercial, Industrial, and Multi-family)

Please indicate project type:	
<input type="checkbox"/> New Construction	<input type="checkbox"/> Deck
<input type="checkbox"/> Addition or Alteration	<input type="checkbox"/> Porch
<input type="checkbox"/> Replacement Windows	<input type="checkbox"/> Reroof or Reside (circle one)
<input type="checkbox"/> Garage	<input type="checkbox"/> Fire Sprinklers
<input type="checkbox"/> Fireplace (Woodburning)	<input type="checkbox"/> Finish Basement
<input type="checkbox"/>	<input type="checkbox"/> Misc. _____

I hereby certify that the information contained herein is correct and agree to do the proposed work in accordance as described above and according to the provisions of the ordinances of the City of Elko New Market, and the State Building Codes. I further agree that any plans and specifications submitted herein shall become part of this permit application. I also understand this permit is valid for a period of six (6) months.

Signature of the Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Total Permit Cost: \_\_\_\_\_ Receipt No. \_\_\_\_\_ Date Paid: \_\_\_\_\_

*A Certificate of Occupancy is required prior to occupancy or use of the structure. This will be issued on completion of a satisfactory final inspection approval by the Building Department. For All Inspections Call 952-461-4777.*

**(FOR OFFICE USE ONLY)**

Application approved for issuance by:

\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
**Zoning Administrator**

\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
**Building Official**

Type of Construction: \_\_\_\_\_ Occupancy Group: \_\_\_\_\_ Use of Building: \_\_\_\_\_

**Square Foot Totals**

Total Square Feet \_\_\_\_\_

Comments/Special Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VALUATION OF WORK**                      \$ \_\_\_\_\_

**BUILDING PERMIT FEE SCHEDULE**

<b>Building Permit</b>	\$ _____
<b>Plan Review Fee</b>	\$ _____
<b>State Surcharge</b>	\$ _____
<b>Water Hook Up</b>	\$ _____
<b>Meter and Accessories</b>	\$ _____
<b>Meter Sales Tax</b>	\$ _____
<b>Sewer Hook Up</b>	\$ _____
<b>Inspection Fee (Sewer &amp; Water)</b>	\$ _____
<b>Storm Water Drainage Utility Conn. Fee</b>	\$ _____
<b>Landscape Escrow</b>	\$ _____
<b>Builders Deposit (Erosion Control)</b>	\$ _____
<b>Inspection Fee (Erosion Control)</b>	\$ _____
<b>Engineer Survey Review</b>	\$ _____
<b>Investigation/Penalty Fee</b>	\$ _____
<b>MCES Fee</b>	\$ _____
<b>TOTAL FEE:</b>	\$ _____