



BUILDING PERMIT APPLICATION

(B) 2020 -
PERMIT NUMBER

CITY OF LONSDALE • PO Box 357 • 415 CENTRAL STREET WEST, LONSDALE, MINNESOTA 55046 • PHONE: (507)744-2327 • FAX: (507)744-5554

APPLICANT COMPLETE INFORMATION BELOW:

PROJECT ADDRESS / LOCATION: _____

APPLICANT: _____ PHONE: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

CONTRACTOR: _____ PHONE: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PROPERTY OWNER: _____ PHONE: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TYPE / USE	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Public / Institutional	PROJECT	<input type="checkbox"/> Building (New Construction) ¹ <input type="checkbox"/> Single-Family: <input type="checkbox"/> Detached <input type="checkbox"/> Attached <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial / Industrial <input type="checkbox"/> Deck / Porch <input type="checkbox"/> Deck Footings Only <input type="checkbox"/> Deck-Major Repair <input type="checkbox"/> Lower Level / Basement Finish ¹ <input type="checkbox"/> 3 Rooms or More <input type="checkbox"/> 2 Rooms or Less <input type="checkbox"/> Re-Roof (Roofing) <input type="checkbox"/> Partial Re-Roof or Accessory Building <input type="checkbox"/> Re-Side (Siding) <input type="checkbox"/> Partial Re-Side or Accessory Building <input type="checkbox"/> Windows and / or Doors <input type="checkbox"/> 3 or More <input type="checkbox"/> 2 or Less	<input type="checkbox"/> Garage / Acc. Structure (Detached) - Over 200 sf <i>(Sheds 200 sf and Under → Zoning Permit)</i> <input type="checkbox"/> Fence (Engineered) - Over 6 ft <i>(Fences 6 ft. and Under → Zoning Permit)</i> <input type="checkbox"/> Retaining Wall (Engineered) - Over 4 ft <input type="checkbox"/> Sign (Engineered) – Freestanding <i>(Building/Wall Sign → Zoning Permit)</i> <input type="checkbox"/> Swimming Pool – Permanent <i>(Temporary Pool → Zoning Permit)</i> <input type="checkbox"/> Fireplace – Wood-Burning <i>(Gas Fireplace → Mechanical Permit)</i> <input type="checkbox"/> Foundation / Waterproofing <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Other _____
	<input type="checkbox"/> New <input type="checkbox"/> Addition / Finish <input type="checkbox"/> Remodel / Repair <input type="checkbox"/> Demolition		<input type="checkbox"/> Garage / Acc. Structure (Detached) - Over 200 sf <i>(Sheds 200 sf and Under → Zoning Permit)</i> <input type="checkbox"/> Fence (Engineered) - Over 6 ft <i>(Fences 6 ft. and Under → Zoning Permit)</i> <input type="checkbox"/> Retaining Wall (Engineered) - Over 4 ft <input type="checkbox"/> Sign (Engineered) – Freestanding <i>(Building/Wall Sign → Zoning Permit)</i> <input type="checkbox"/> Swimming Pool – Permanent <i>(Temporary Pool → Zoning Permit)</i> <input type="checkbox"/> Fireplace – Wood-Burning <i>(Gas Fireplace → Mechanical Permit)</i> <input type="checkbox"/> Foundation / Waterproofing <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Other _____	

¹ Separate **Plumbing & Mechanical** Permit(s) Req'd

See Page-2 For Submittal Requirements and Further Information, Comments, and Conditions

DESCRIPTION OF PROJECT	ESTIMATED VALUE (Materials & Labor)
	\$

NOTE: This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. I agree that all provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not give authority to violate or cancel the provisions of any other state or local law regarding construction or the performance of construction.

APPLICANT SIGNATURE	DATE
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SUBMITTAL REQUIREMENTS:

- 2 Copies - **Certified Land Survey** (Site Plan Map) – New Buildings, Additions, Decks, Accessory Structures, Fences, Retaining Walls, Pools, Signs
- 2 Copies - **Building Plans** – Required for All Permits, but the following: Re-Roof, Re-Side, Windows/Doors, Fireplace
- New Homes Only: 1 Copy - **Energy Data** 1 Copy - **Heat Loss Data** 1 Copy – **Ventilation & Combustion Air**

CERTIFICATE OF OCCUPANCY:

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.

INSPECTIONS & INFORMATION:

Inspections: For all inspections contact Building Official **Gary Staber @ 952-461-4777** or inspectenm@outlook.com
 Information: For information contact the Building Official or visit: www.minspections.com or www.lonsdale.govoffice.com

COMMENTS & SPECIAL CONDITIONS:

BUILDING / PROJECT NOTES:

Finished Area (sq. ft.) _____ Occupancy Group _____ Building Type _____
 Total Area (sq. ft.) _____ Use of Building _____ Project Value \$ _____
 (per State of Minnesota / Building Official)

CONTACTS:	FEES:	RECEIPT:
<ul style="list-style-type: none"> • Building Inspector Gary Staber (952) 461-4777 • Electrical (State of MN) Randy Edel (507) 334-3748 • Public Works Director Russ Vlasak (507) 744-2397 • City Planner Ben Baker (507) 744-2327 • City Engineer John Powell (952) 737-4661 	PERMIT FEE \$ _____ PLAN CHECK & INSP. \$ _____ STATE SURCHARGE \$ _____ WATER METER \$ _____ WATER HOOK-UP \$ _____ SEWER HOOK-UP \$ _____ EROSION CONTROL \$ _____ LANDSCAPE ESCROW \$ _____ TOTAL \$ _____	<input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card RECEIPT / CHECK / AUTHORIZATION NO. _____ ISSUED BY: _____ DATE PAID / ISSUED: _____
_____ BUILDING INSPECTOR - APPROVAL		
_____ CITY PLANNER / CITY ADMINISTRATOR / CITY STAFF - APPROVAL		
_____ CITY ENGINEER - APPROVAL		