## **Building Permit Application**

1920 County Road 90 Phone: (763) 479-0531 Independence, MN 55359 Fax: (763) 479-0528



Site Address:		Date Applied:	
Owner Name Property ID:		Date Approved:	Permit #
Telephone #:			
Type of Work:  ☐ New Construction ☐ Addition ☐ Deck ☐ Finish/Remodel ☐ Mechanical ☐ Fireplace	<ul><li>□ Plumbing</li><li>□ Re-Roof</li><li>□ Re-Side</li><li>□ Septic</li><li>□ Sign</li><li>□ Other</li></ul>	Firm: Contact: Address:	ractor Information
·		Phone:	
Description:		License #:	'ype:
Valuation of Work:			· ·
Structure Size			
Length	Width	Offic	e Use Only-FEES
Sq. Ft	Height		Plan Review Fee
Acknowledgement and Signature:  The undersigned hereby requests permission to make the real improvements specified, and declares under penalty of law acknowledgement and acceptance of all information, conditions, and requirements represented on this document. The undersigned affirms to the accuracy of all information submitted along with the application and acknowledges responsibility to pay for plan review costs associated with this application regardless of if the permit is issued.  The undersigned recognizes that this document is merely an application and that no work may be completed until plans have been approved, all permit fees are paid, and the permit has been issued. After the permit has been issued, the undersigned agrees to do all work in strict compliance with all City of Independence ordinances and State of Minnesota building code requirements. The undersigned further agrees to carry out inspections necessary for this permit.		Mech Fireplace Driveway Sewer	Plumbing Septic Other
		Total Fee(s)  Building Official Approval:	
Signature:		<u>bsatek@ci.independence.mn.us</u>	
Print Name:		Payment type	<u></u>