



BUILDING PERMIT APPLICATION

Date Received _____ Received by _____ Permit # _____

APPLICANT

Project Address _____ or PID # _____

Legal Description _____

Property Owner _____ Phone _____

Address _____ City _____ Zip _____

General Contractor _____ License # _____ Phone _____

Mechanical Contractor _____ License # _____ Phone _____

Plumbing Contractor _____ License # _____ Phone _____

PROJECT

Proposed Use [Check One]:

Dwelling _____ Private Garage _____ Deck _____ Home Addition _____
Pole Building _____ Finish Basement _____ Three Season Porch _____ Business _____
Fireplace _____ Reroof _____ Siding _____ Furnace _____
Water Heater _____ Other _____

Description of Project:

Estimated Value \$ _____

DEMOLITION

Use of dumpster on site during construction _____

Description of Project: _____

Dimensions: _____ Use and Occupancy: _____

Type of Construction: _____

Estimated Value: \$ _____ Lot Size/Dimensions: _____

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. 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 presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

SIGNATURE

Name [please print] _____ Address _____
 City _____ Zip _____ Phone _____
 Signature _____ Date _____

STOP
BELOW FOR CITY OF BLUE EARTH USE ONLY

<p>PLANNING Zoning District _____ Minimum Setbacks Required: Front _____ Side _____ Rear _____ ROW _____ Other _____ Notes _____</p> <p>Reviewed by: _____ Date: _____ Subject to Following Conditions: _____ _____</p>		
BUILDING	Reviewed by: _____	Date: _____
FEES		
Building Permit \$ _____	Plan Review \$ _____	State Surcharge \$ _____
Plumbing Permit \$ _____	Plan Review \$ _____	State Surcharge \$ _____
Mechanical Permit \$ _____	Plan Review \$ _____	State Surcharge \$ _____
Other \$ _____		
TOTAL DUE \$ _____		
DATE ISSUED _____ ISSUED BY _____ RECEIPT # _____		