

CITY OF GLENCOE
1107 11th Street East, Suite 107
Glencoe, MN 55336
Phone: 320-864-5586

BUILDING PERMIT

Handout Given

Lead Handout Given

Routed to MNSPECT

TO BE FILLED OUT BY APPLICANT - INCOMPLETE APPS MAY NOT BE PROCESSED

SITE ADDRESS: _____ **PID:** _____

- 1) Was the home constructed before 1978? (**YES** , continue with line 2, **NO** continue without completing EPA Section)
- 2) Will the work disturb ≥6 sq ft of interior painted surfaces or ≥20 sq ft of exterior painted surfaces? (**YES** go to line 4, **NO** line 3)
- 3) Are there any windows being replaced? (**YES** , go to line 4, **NO** continue without completing EPA Section)
- 4) Has this home been Certified Lead Free? (**YES** , you **MUST** Attach Certification Information, **NO** complete line 5)
- 5) EPA Contractor Certification Number: **NAT -**

PROPERTY OWNER: _____ **Address:** _____

City: _____ State: _____ Zip: _____ Email: _____

Contact Name: _____ Phone: _____

CONTRACTOR: _____ **Address:** _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Contractor License No: _____ **Contact Name:** _____ **Phone:** _____

Email: _____

ARCHITECT: _____ **Address:** _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Email: _____ **Contact Name:** _____ **Phone:** _____

TYPE OF WORK:

Commercial Residential New Construction Deck Pool Re-Roof

Change of Use Retaining Wall Porch Re-Side

Finish Basement Demolition Fence _____

Remodel Fire Sprinkler Shed _____

Addition Fire Alarm Window/Door Replacement

Garage-Attached/Detach Misc Other # being replaced _____

Detailed Description of Work:

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative, is required and authorizes the Zoning Administrator or designee and the Building Official or designee to enter upon the property to perform needed inspections. Entry may be without prior notice. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions and to abide by all ordinances of the Municipality and the laws of the State of Minnesota regarding actions taken pursuant to this permit. I agree to pay all plan review fees even if I choose not to proceed with the work. Permit expires when work is not commenced within 180 days from date of permit, or if work is suspended, abandoned, or not inspected for 180 days. Work beyond the scope of this permit, or work without a permit or inspection, will be subject to a penalty.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

PRINTED NAME: _____ **This is the signature of:** Owner or Owner's Representative

OCCUP. TYPE: _____ **CONST. TYPE:** _____ **CODE:** _____ **BLDG SPRINKLED** Yes / No

VALUATION: \$ _____

Permit Fee: \$ _____ Park Dedication: \$ _____

Plan Review Fee: \$ _____ Staking Fee: \$ _____

State Surcharge: \$ _____ Construction Water: \$ _____

Site Inspection Fee: \$ _____ Sewer Hook-Up: \$ _____

S.E.C. Fee: \$ _____ Water Hook-Up: \$ _____

Investigation Fee / Other Fee: \$ _____ Water Meter: \$ _____

Copy Charge (\$.25 per 8.5 x11 page) \$ _____ Meter Tax: \$ _____

License Check (\$5) / Lead Check (\$5) \$ _____ EEAC (Light & Power): \$ _____

SUB-TOTAL \$ _____ Other: \$ _____

Mechanical Fee (from Page 2) \$ _____ **TOTAL DUE: \$** _____

Plumbing Fee (from Page 3) \$ _____

Special Conditions/Required Setbacks:

Building Approval By: _____ **DATE:** _____

Printed Building Approval By: _____ License Verification Lead Verification - Checked By: _____

City Approval By: _____ **DATE:** _____

Paid: _____ **Date:** _____ **Receipt No.** _____ **By:** _____

OFFICE USE ONLY