

CITY OF EAGLE LAKE

Date _____

705 Parkway Ave, P.O. Box 159, Eagle Lake MN 56024 (507) 257-3218 Permit Number _____

BUILDING PERMIT APPLICATION**ZONING PERMIT APPLICATION**

1. OWNER _____ (Name) _____ (Address) _____ (Tel. No.)			Building Inspector Fees		
2. SITE ADDRESS _____			Permit Fee _____		
PROPERTY I.D. NUMBER _____			Plan Check Fee _____		
ZONING DISTRICT (check one) R1 R2 R3 R4 B1 L1 H1 A1			Penalty Fee _____		
3. GENERAL CONTRACTOR _____ LICENSE NO. _____			Surcharge Fee _____		
(Address - include city) _____ (Tel. No.) _____			Fireplace _____		
4. PLUMBING CONTRACTOR _____ LICENSE NO. _____			Plumbing Fee _____		
(Address - include city) _____ (Tel. No.) _____			Mechanical Fee _____		
5. MECHANICAL CONTRACTOR _____ LICENSE NO. _____			City Fees		
(Address - include city) _____ (Tel. No.) _____			Water Meters _____		
6. TYPE OF WORK A/C Addition Alterations Basement Finish			State Sales Tax _____		
Deck Demolition Fence Fireplace Garage			County Sales Tax _____		
Heating Porch Reroofing Residing Shed			Water Fee _____		
Sprinkler System New Construction Wall			Sewer Fee _____		
Window(S) - (#) _____ Misc. _____			Admin Fee _____		
7. SIZE OF STRUCTURE 8. NO. OF STORIES 9. VALUE OF PROJECT			Other _____		
(Height) (Width) (Depth)				Total Fees _____	
10. ESTIMATED COMPLETION DATE _____			11. USE OF PROPERTY _____		
12. Front Yard Set Back _____			13. Rear Yard Set Back _____		
Feet: _____			Feet: _____		
14. Side Yard Set Back _____			11. USE OF PROPERTY _____		
Right Side: _____			Left Side _____		
SPECIAL CONSIDERATIONS (Office Use):			Zoning Approvals		
Notes (Office Use):			Zoning Check _____		
			Public Works Inspections		
			Staking Inspection _____		
			Sump Pump Inspection _____		
			W/S Hookup Inspection _____		
Final Zoning Inspection _____			Driveway Inspection _____		
Total Sq Footage: _____			All Construction Projects:		
35% Usage: _____			Contact City Hall for staking, sump		
Sq Footage Used: _____			pump, water/sewer hookup and final		
Sq Footage Balance: _____			zoning inspections at 507-257-218.		
Sq Footage Needed: _____					

For Building Permit Inspections Call: 1-877-333-5620 Twenty-four hour notice

ACKNOWLEDGEMENT AND SIGNATURE: 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 that the same to be true and correct. All provisions of law 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. **Please give 24 hour advance notice on all inspections.**

Submission of this application does not constitute a permit being issued.

Signature of Applicant _____ Date _____

Approved by Building Inspector/City Administrator _____ Date _____