

DATE RECEIVED: _____
RECEIVED BY: _____
PERMIT # _____



BUILDING PERMIT APPLICATION

APPLICANT USE:

PROJECT ADDRESS: _____ OR PID # _____
PROPERTY OWNER: _____ PHONE # _____
ADDRESS: _____ LOT: _____ BLOCK: _____
SUBDIVISION: _____

Email: _____

GENERAL CONTRACTOR: _____
ADDRESS: _____
LICENSE # _____ PHONE # _____

PROPOSED USE: (CHECK ONE) DWELLING ☐ PRIVATE GARAGE ☐ DECK ☐ HOME ADDITION ☐
FINISH BASEMENT ☐ THREE SEASON PORCH ☐ SIDING ☐ ROOFING ☐ BUSINESS/COMMERCIAL ☐
OTHER ☐

DESCRIPTION OF PROJECT: _____

USE AND OCCUPANCY: _____ TYPE OF CONSTRUCTION: _____
ESTIMATED VALUE: _____

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION 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 THE 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 PROVISION OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE: _____ DATE: _____

CITY USE ONLY:

PLANNING: ZONING DISTRICT: _____ MINIMUM SETBACKS REQUIRED: FRONT _____ SIDE _____
REAR _____ ROAD RIGHT OF WAY _____ OTHER _____

REVIEWED BY: _____ DATE: _____
SUBJECT TO THE FOLLOWING CONDITIONS: _____

BUILDING INSPECTIONS: REVIEWED BY: _____ DATE: _____
SUBJECT TO THE FOLLOWING CONDITIONS: _____

PUBLIC WORKS: REVIEWED BY: _____ DATE: _____
SUBJECT TO THE FOLLOWING CONDITIONS: _____

CITY HALL:
CITY OF CENTERVILLE
1880 MAIN STREET
CENTERVILLE, MN 55038
PHONE: 651-429-3232 FAX: 651-429-8629

PUBLIC WORKS:
2085 W. CEDAR STREET
CENTERVILLE, MN 55038
PHONE: 651-429-4750

(IF YOU HAVE QUESTIONS ON CODE ITEMS, REQUIRE INSPECTIONS OR TO SCHEDULE AN INSPECTION CALL 651-429-4750)