

Permit Number: _____ Date Received: 8-10-21 Parcel Number: _____

Construction Permit Application

To the City Council of the City of Vergas in the County of Otter Tail, State of Minnesota:
Application is hereby made by the undersigned for a Construction Permit as provided by City Ordinance as adopted by the City of Vergas.

- GOPHER STATE ONE CALL MUST BE NOTIFIED 48 HOURS PRIOR TO ANY DIGGING, CALL 1-800-252-1166 AS REQUIRED BY MINNESOTA STATE LAW.
- THE CITY OF VERGAS WILL CHECK ALL SETBACKS ON ANY NEW CONSTRUCTION. IT IS THE APPLICANT'S RESPONSIBILITY TO HAVE ALL PROPERTY LINES LOCATED. ALL NEW CONSTRUCTION REQUIRES THE APPLICANT TO MARK THE PROPOSED BUILDING SITE AND PROPERTY LINES BEFORE THE BUILDING PERMIT WILL BE APPROVED.
- **All Electrical work MUST have an electrical permit, which must be obtained separately from a MN State Contract Electrical Inspector (218)342-3345 or (218)849-6059.**

Property Description: (NEW CONSTRUCTION ONLY)

Lot _____, Block 5 FUTURE BLOCK Addition Storage Shed 8x12
Property: Width _____ feet, Length _____ feet

Must supply City with a \$1,000 deposit for tar break up. City will reimburse \$1,000 when project complete and street is approved by Utilities Superintendent.

PLEASE NOTE: WITH ANY NEWLY CONSTRUCTED HOME, THERE ARE FEES FOR START UP OF UTILITIES. WATER HOOK-UP ASSESSMENT IS \$750.00, SEWER IS \$750.00.

Name of Applicant: Larry Schrupp

Address of Construction Project: 375 RAILWAY AV SO

Mailing Address: P.O. Box 35 Phone: 342-2390

Name of Owner (If not the Applicant) : _____

Address of Owner (If not the Applicant) : _____

1. Permit to (CIRCLE ONE)

<u>Build</u>	Install	Addition	Alter
Move	Demolish	Repair	Remodel

Description of work to be done:

Shed - 8' x 12'

2. Proposed use of building: (CIRCLE ONE) Residential Commercial

3. **VALUATION** (not just your cost) of work being completed: \$ 1,700

Building Contractor:

Name: Larry Schrupp License Number: 00 BC 1006 Phone: 342-2390

Plumber: (must have MN License)

Name: _____ License Number: _____ Phone: _____

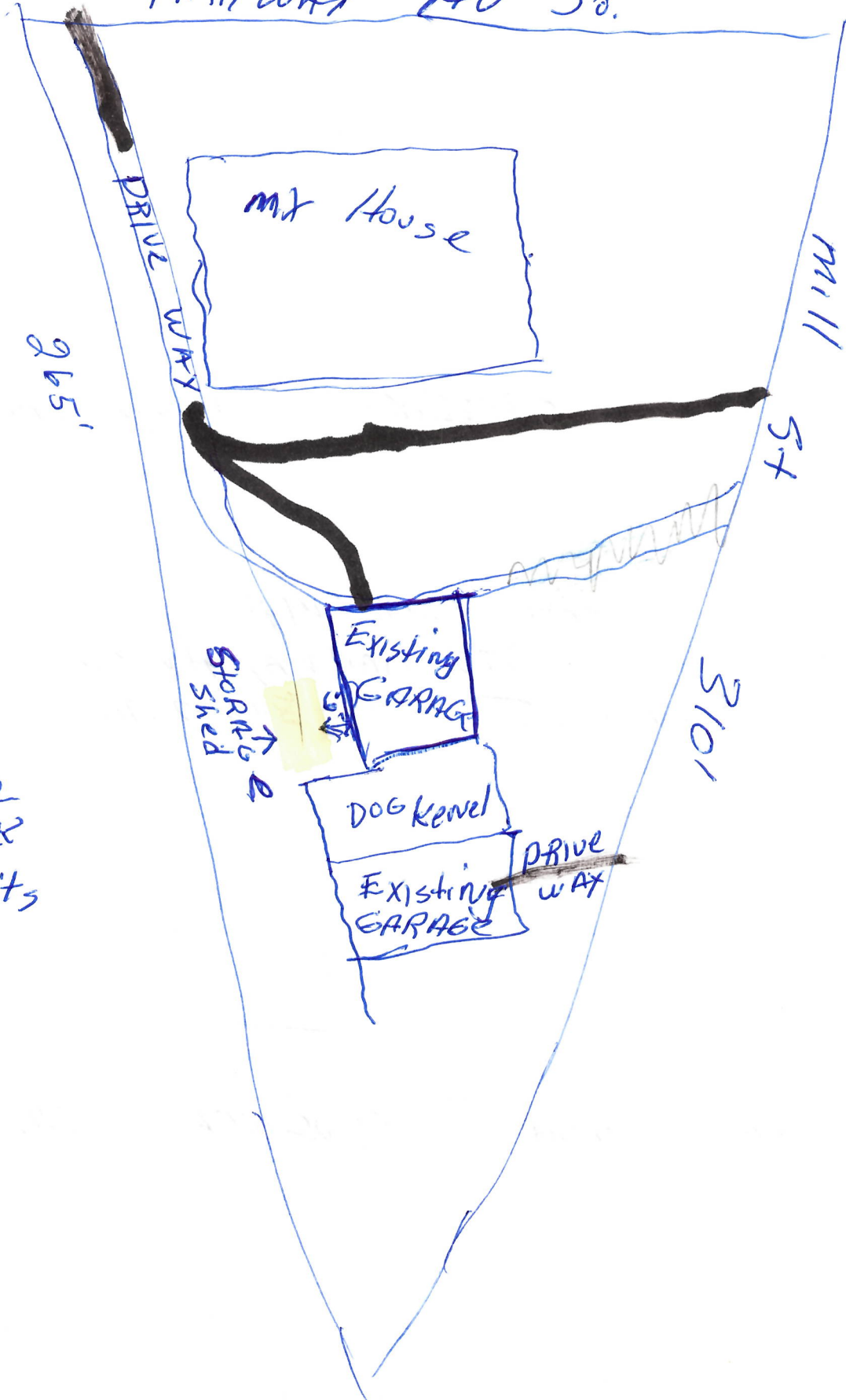
Electrician:

Name: _____ License Number: _____ Phone: _____

Form approved by City of Vergas Council 09/12/2017

Receipt # 144466 - 8-10-2021

100'
RAILWAY AV 50.



OWN ALL
OF BLOCK
5 Nesbitts
ADDITION