

Permit Number: _____ Date Received: _____ 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 _____, Addition _____

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: Kerry R Strand

Address of Construction Project: 100 S. Townline Rd

Mailing Address: _____ Phone: _____

Name of Owner (If not the Applicant): _____

Address of Owner (If not the Applicant): _____

1. Permit to (CIRCLE ONE)

Build	Install	Addition	Alter
Move	Demolish	Repair	Remodel

Description of work to be done:

Shed

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

3. **VALUATION** (not just your cost) of work being completed: \$ 3600

Building Contractor:

Name: _____ License Number: _____ Phone: _____

Plumber: (must have MN License)

Name: _____ License Number: _____ Phone: _____

Electrician:

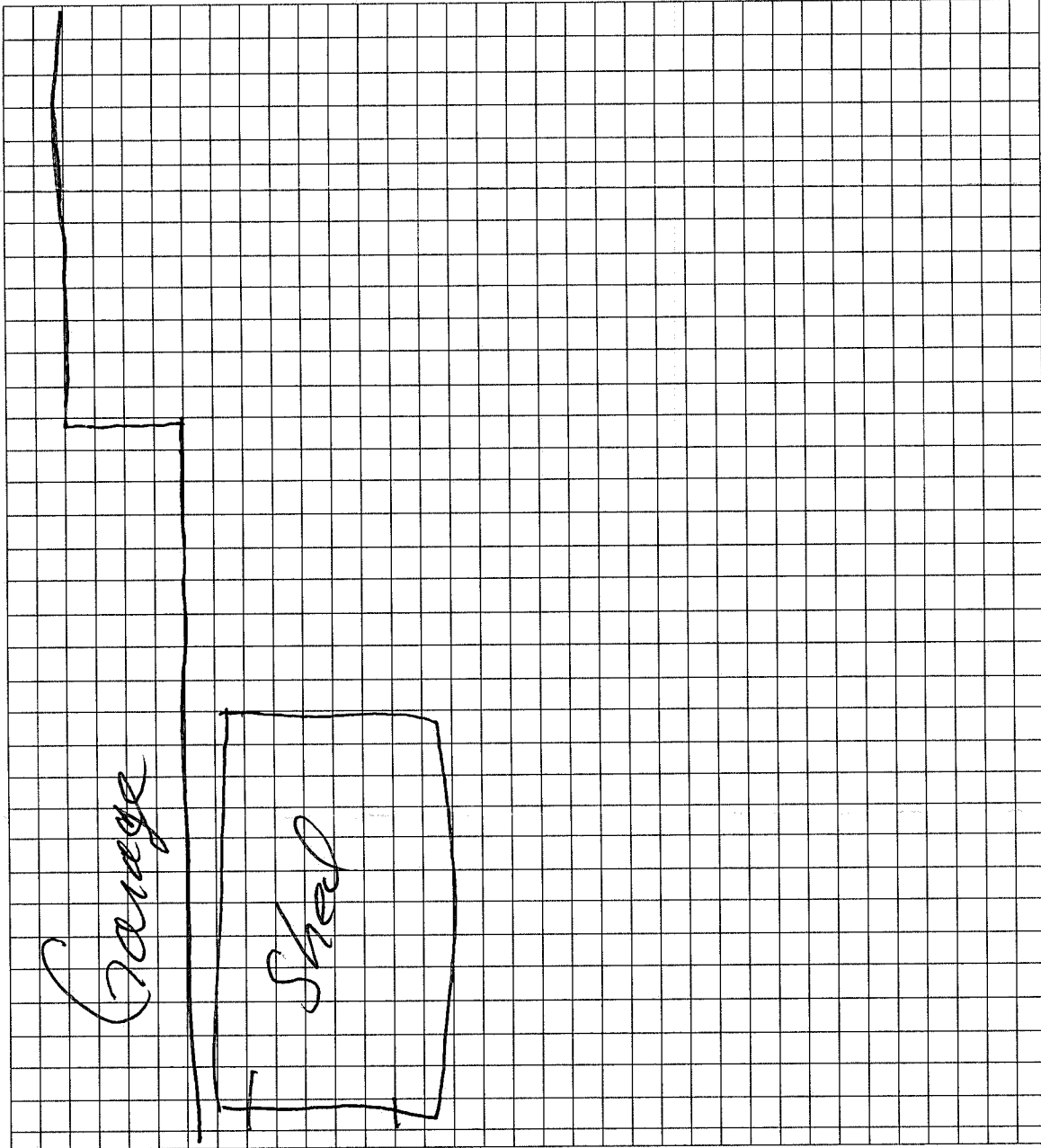
Name: _____ License Number: _____ Phone: _____

CONSTRUCTION APPLICATION SITE PLAN DESIGN

1. Please identify and describe the work to be covered by the permit for which application is being made on the line provided below:

Shed

2. Please sketch the proposed project on the graph below. Describe the land on which the Proposed work is to be done (note the lot size and dimensions and locations of proposed project).



I do hereby say that the facts stated by me in the above site application are true to the best of my knowledge and belief. Please be aware that no construction shall begin until the Zoning official has approved the plans and revisions/the site plan if necessary and has indicated approval to begin.

[Signature]
Signature of Applicant

8/2/21
Date

Zoning Official

Date



OTTER TAIL COUNTY ASSESSOR

Assessor Hub provided by
Vanguard Appraisals, Inc



Parcel Number:

82-000-99-0189-000

Deed Holder:

KERRY & MICHELLE STRAND

Property Address:

100 TOWN LINE RD
VERGAS, MN 56587-0000 [MAP THIS ADDRESS](#)

Mailing Address:

100 TOWNLINE RD S

VERGAS, MN 56587-4218 USA

PDF Name:

VERGAS VILLAGE

Subdivision:

02201-KEILLEY SHORES

Sec-Twp-Rng:

30-137-040

Legal Description:

LOT 1 BLK 1

No image
to display

Prior Year Value Information

Year	Land Value	Dwelling Value	Improvement Value	Total Value
2022	\$18,400	\$190,500	\$0	\$208,900
2021	\$16,200	\$0	\$214,000	\$230,200
2020	\$13,720	\$0	\$203,880	\$217,600

