Permit Number: 2072-01 Date Received: 4/18/17 Parcel Number: 82000090058000

## **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 <u>APPLICANT'S RESPONSIBILITY</u> TO HAVE ALL
  PROPERY 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.

(218)849-6059.		
Property Description: (NEW	CONSTRUCTION ONL	$(\mathbf{Y})$
Lot ,Block	, Addition	
Lot,Block 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: The Lavish Com - Tom + Swah Wacker		
Name of Applicant:	Ash Con- 10m 7	+ Seran Walle
Address of Construction Project:/	30 E. Main	Q. Vergas
Mailing Address: 35224 Fredgen Flyev Rophone: 219-850-7870		
Name of Owner (If not the Applicar	in Jon & from	an Wacher
Address of Owner (If not the Applicant):		
1. Permit to (CIRCLE ONE)		
Build (Ins	tati Addition	Alter length of the front windows
	molish Repair	Remodel
Description of work to be d	one:	WINDAUS
Was I are implant stop	I work a way a will	ring top and later to "white"
Paint or ower Pillar	s in Rout to	"white" Fanc- Our Just'n Helmke
2. Proposed use of building: (CIRCLE ONE) Residential Commercial 346-5ign Sav  3. VALUATION (not just your cost) of work being completed: \$\frac{1}{3}\text{LUATION} (\text{pit just your cost}) of work being completed:		
3 VALUATION (not just your cost) of work being completed:		
Building Contractor:		
Name: JH Signs	License Number:	Phone: 346-Sign
Plumber: (must have MN License)		
Name:	License Number:	Phone:
Electrician:		
Name:	License Number:	Phone:
		Form approved by City of Vergas Council 09/12/2017

property including existing buildings. If you have a copy of a professionally prepared site plan, attach a copy for review by the City's Site/Zoning Inspector. Blueprint or Design Drawings must be submitted for any new construction, addition, or remodel. 5. Certification: I hereby certify that I am the applicant herein and that the information given above and/or any exhibits submitted herewith is in all respects true and accurate to the best of my knowledge and belief, and further, if this permit is granted, said construction will comply with plans and specifications herewith submitted and applicable requirements of the City of Vergas. 6. I am the (CIRCLE ONE) OWNER LESSEE **PURCHASER AGENT** 7. APPLICANT'S SIGNATURE: FOR OFFICE USE ONLY Water Hook-up 2500 Permit Fee \$ \_\_\_\_ Tar Break Up Deposit Receipt # 144669 Date Paid 4pr. 28 20 20 Form given to client to display the permit to be visible from the street & to notify office of completion. Permit expires in one year if project is not complete please reapply for permit.

4. Attached a "Site Plan", showing the proposed location of any new building in reference to the