Permit Number: <u>82000910145000</u> Any questions regarding construction permit please contact City Clerk-Treasurer by calling 218-302-5996 or stopping by the city office at 111 Main Street Vergas MN.
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 PROPERY LINES LOCATED. ALL NEW CONSTRUCTION REQUIRES THE APPLICANT TO MARK THE PROPOSED BUILDING SITE AND PROPERTY LINES BEFORE THE CONSTRUCTION PERMIT WILL BE APPROVED. • All Electrical work MUST have an electrical permit. That must be obtained separately from a MN State Contract Electrical Inspector (218)342-3345 or (218)849-6059. Property Description: (NEW CONSTRUCTION ONLY)
Lot
Address of Construction Project: 310 W. Glenn St. Mailing Address: P.O. Box 17 Phone: 218-841-5564 1. Permit to (CIRCLE ONE) Build Install Addition Alter Move Demolish Repair Remodel Description of work to be done: Asphalf Division (1600 F2) Exterior Shed Fivish
2. Proposed use of building: (CIRCLE ONE) Residential Commercial 3. VALUATION (not just your cost) of work being completed: 5 48,800 50 Asphalt Building Contractor:
Name: Howard's Driverse License Number: Phone: Z18-564-4483 Plumber: (must have MN License)
Name: License Number: Phone: Phone:

Name: _____License Number: _____Phone: _____Form approved by City of Vergas Council 09 12 2017

4.	Attached a "Site Plan." showing the proposed location of any new construction in reference to the 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: DATE: D
	CONSTRUCTION APPLICATION SITE PLAN DESIGN Provided on separate sheet must include the following.
1.	Identify and describe the work to be covered by the permit for which application is being made
	 A. Sketch of the proposed project including current and proposed structures. B. Note the lot size and dimensions and locations of proposed project.
Please	reby say that the facts stated by me in the site application are true to the best of my knowledge and belief, be aware that no construction shall begin until the Zoning official has approved the plans and revisions the mif necessary and has indicated approval to begin.
2	2 /1 delict/2022
Signa	ture of Applicant Date Zoning Official Date

S	Water Hook-up SSewer Hook-up
S	Water Hook-up SSewer Hook-up Permit Fee STar Break Up Deposit
S	25 Total Fees
R	eceipt = 4997 Date Paid 6/9 2000
4	Date:20
S	ignature: (Permitting Authority)
_ [Date Approved by Planning Commission or Clerk-Treasurer: 20