Any que	Number: 307509 Date Received Stions regarding constructions or stopping by the city officers.	n permit please contact	el Number: <u>₹ 2400500 / ₹ ₹</u> 000 : City Clerk-Treasurer by calling 218- Vergas MN.
Applicat Ordinano	ity Council of the City of Vion is hereby made by the unce as adopted by the City of GOPHER STATE ONE CAIDIGGING, CALL 1-800-252 THE CITY OF VERGAS WEONSTRUCTION. IT IS THE ROPERY LINES LOCATE APPLICANT TO MARK THE LINES BEFORE THE CONSTRUCTION.	ndersigned for a Const Vergas. LL MUST BE NOTIFI 2-1166 AS REQUIREI ILL CHECK ALL SET IE <u>APPLICANT'S RE</u> ED. ALL NEW CONST IE PROPOSED BUILL STRUCTION PERMI	Otter Tail, State of Minnesota: ruction Permit as provided by City ED 48 HOURS PRIOR TO ANY D BY MINNESOTA STATE LAW. TBACKS ON ANY NEW SPONSIBILITY TO HAVE ALL FRUCTION REQUIRES THE DING SITE AND PROPERTY
	National State Contract Electrical In Description: (NEW CONS		
Lot,Block,Addition			
2. P	roposed use of building: (CIR		
3. <u>V</u>	ALUATION (not just your cos	it) of work being compl	eted: <u>\$ (000</u> 0.00
Build	ing Contractor:		
Name	e:Lic	ense Number:	Phone:
	ber: (must have MN License)		
Name	e: Lí	cense Number:	Phone:

Electrician:

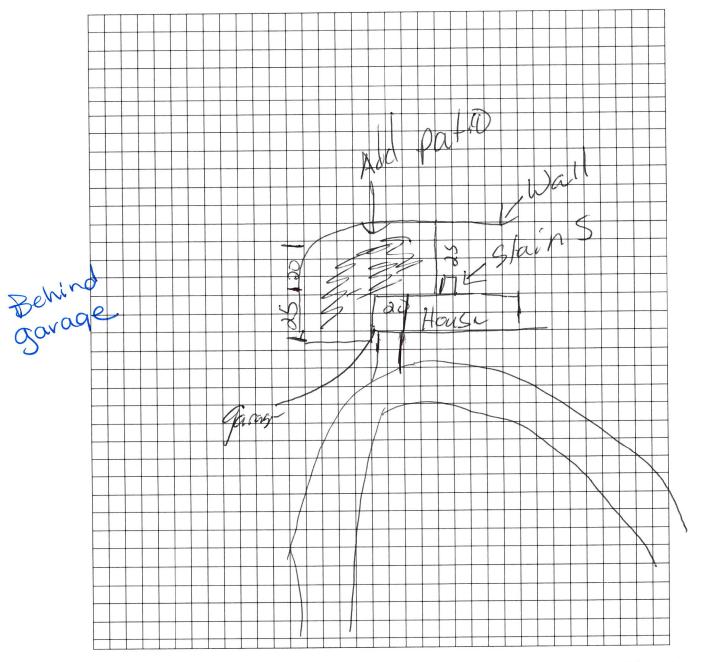
Name: _____ License Number: _____ Phone: ______ Form approved by City of Vergas Council 09/12/2017 Updated 5/10/2022

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: DATE: DATE: DATE: Permit expires in one year if project is not complete, please reapply for permit.			
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.			
I do hereby say that the facts stated by me in the 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.				
Man Wise Sept 12022				
Signat	ture of Applicant Date Zoning Official Date			

\$_	Water Hook-up \$Sewer Hook-up			
\$_	Permit Fee \$ Tar Break Up Deposit			
\$_	25. — Total Fees			
Receipt # 1493B Date Paid Sept. 1,20				
Sig	gnature: Date:, 20 (Permitting Authority)			
Date Approved by Planning Commission or Clerk-Treasurer:, 20				

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:
- 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 of Applicant Date Zoning Official Date
Form approved by City of Vergas Council 09/12/2017