

Permit Number: _____ Date Received: 9/30/24 Parcel Number: 8200099030 S000
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 PROPERTY 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 _____, Block _____, Addition _____
Property: Width 71 feet, Length 200 feet

ST+ 47,426

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: Chris Lindborg CML Construction Inc

Address of Construction Project: _____

Mailing Address: 13332 270th Ave Phone: 701 212 9417

1. Permit to (CIRCLE ONE) DL
- | | | | |
|--------------|----------|----------|---------|
| <u>Build</u> | Install | Addition | Alter |
| Move | Demolish | Repair | Remodel |
- Description of work to be done: _____

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

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

Building Contractor:

Name: _____ License Number: _____ Phone: _____

Plumber: (must have MN License)

Name: _____ License Number: _____ Phone: _____

Electrician:

Name: _____ License Number: _____ Phone: _____

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 Vegas.
6. I am the (CIRCLE ONE) OWNER LESSEE PURCHASER AGENT
7. APPLICANT'S SIGNATURE: [Signature] 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.

 Signature of Applicant Date Zoning Official Date

FOR OFFICE USE ONLY

S 0 Water Hook-up S 0 Sewer Hook-up

S _____ Permit Fee S _____ Tar Break Up Deposit

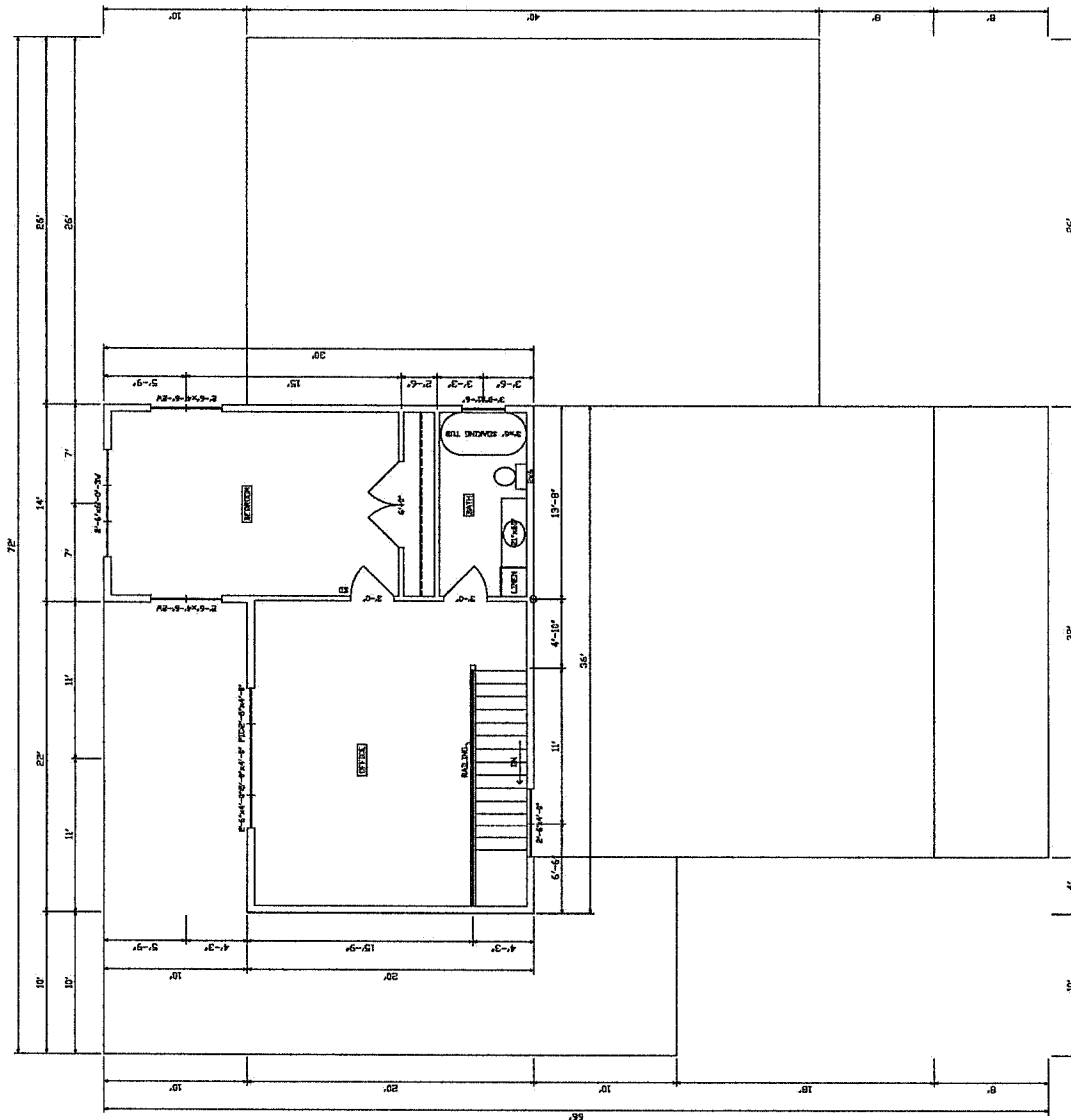
S _____ Total Fees

Receipt = _____ Date Paid _____, 20__

 Signature: _____ Date: _____, 20__
 (Permitting Authority)

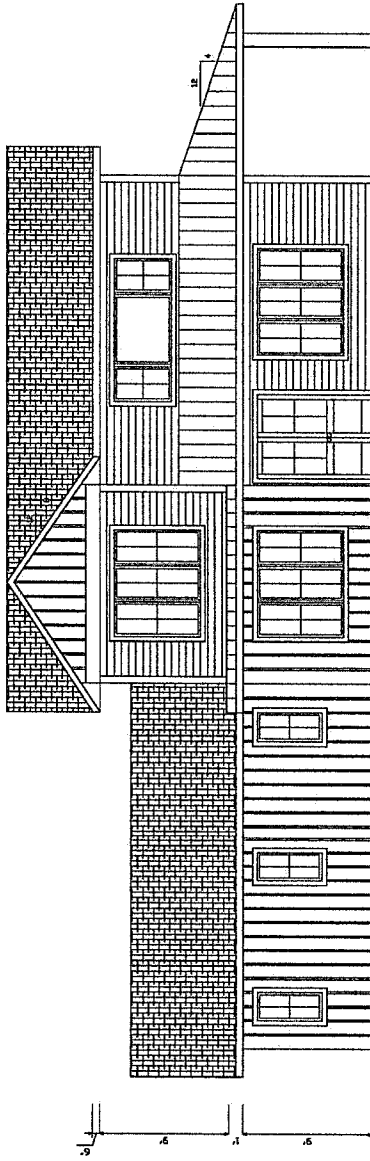
Date Approved by Planning Commission or Clerk-Treasurer: _____, 20__



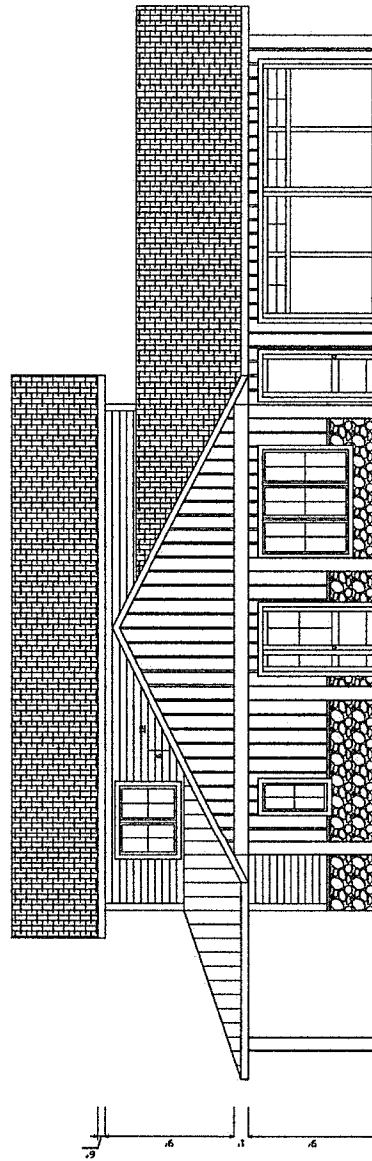


UPPER PLAN

MS' CEILING
 OTHER FLOOR PLANS AND ANY ACCOMPANYING DOCUMENTS
 YOU GET PROVIDED BY A REALTOR OR AGENT IS CHECKED
 BY AN AGENT IN INVESTIGATION IS MADE AS TO WHETHER
 THE COMPLETE INFORMATION IS THAT THEY ARE IN COMPLIANCE
 WITH THE LAW. BEING CHECKED IF YOU ARE NOT COMPLIANT
 WITH THE LAW, THE INVESTIGATION, YOU WILL BE A
 VIOLATOR OF THE LAW.



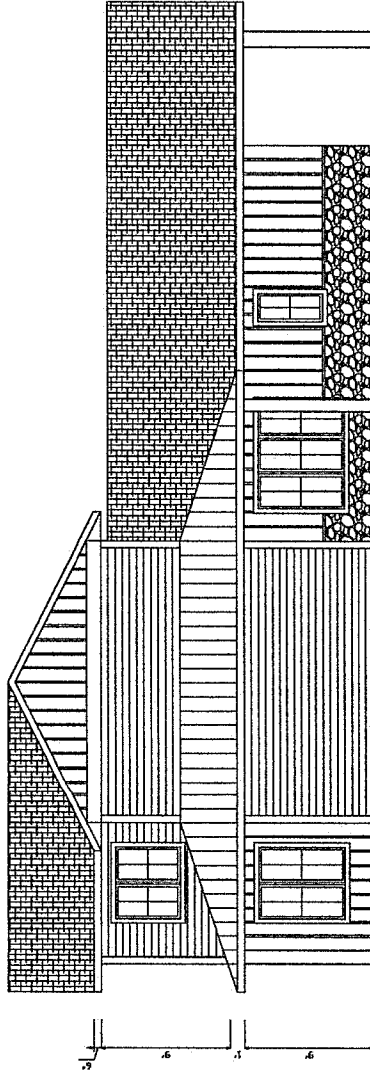
WEST ELEVATION



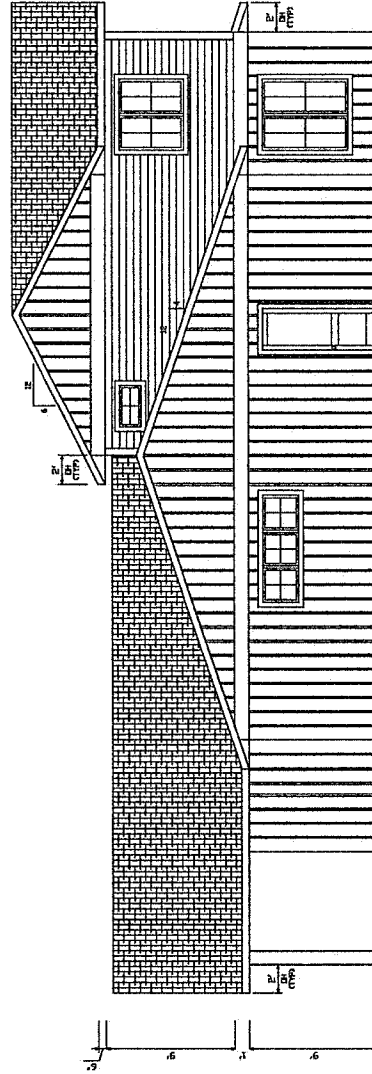
EAST ELEVATION

DATE: 10/10/2024
 DRAWN BY: T. RUST
 CHECKED BY: J. RUST
 PROJECT: 210841-5253
 CLIENT: CNL CONSTRUCTION, INC.
 LOCATION: 1000 W. 10TH ST., SUITE 100, OMAHA, NE 68104

NANCY'S DRAFTING & DESIGN	
1/4" = 1' - 0"	DATE: 10/10/2024
8/2024	210841-5253
CNL CONSTRUCTION, INC.	
T. RUST	1



SOUTH ELEVATION



NORTH ELEVATION

NOTES: 1. START AT 8' FROM THE GROUND LINE. 2. SEE ELEVATION FOR WINDOW SIZES. 3. SEE ELEVATION FOR DOOR SIZES. 4. SEE ELEVATION FOR ROOF PITCH. 5. SEE ELEVATION FOR CHIMNEY PITCH. 6. SEE ELEVATION FOR STONE VENEER PATTERN.

NANCY'S DRAFTING & DESIGN

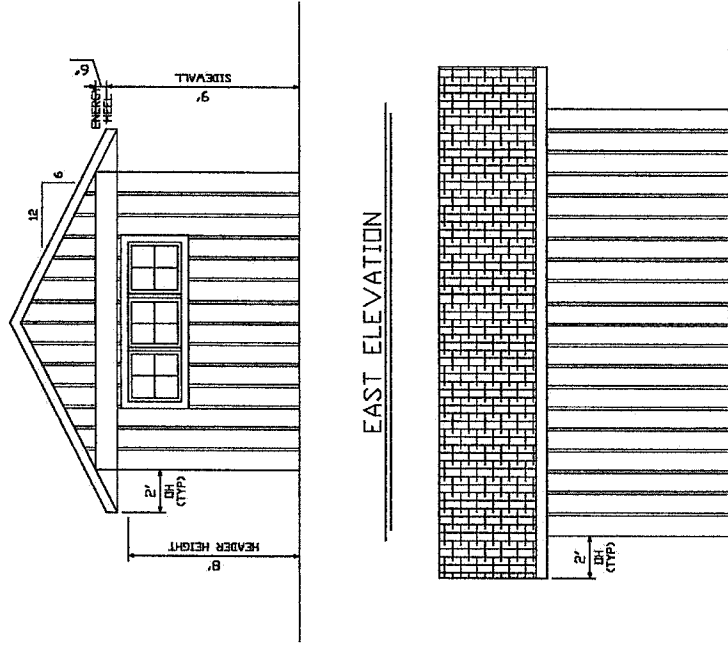
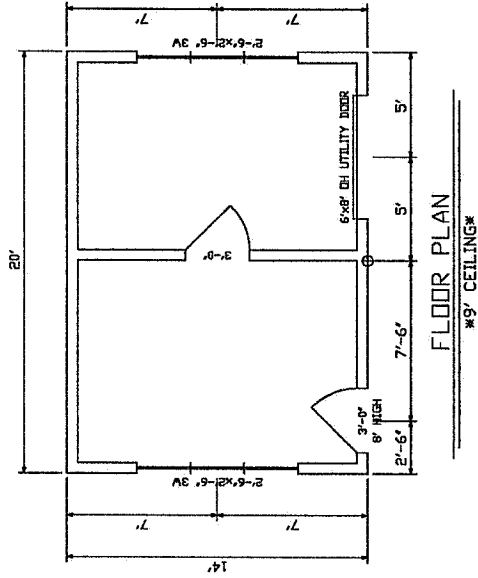
1775-17-07 02/08/17-5553

8/2024

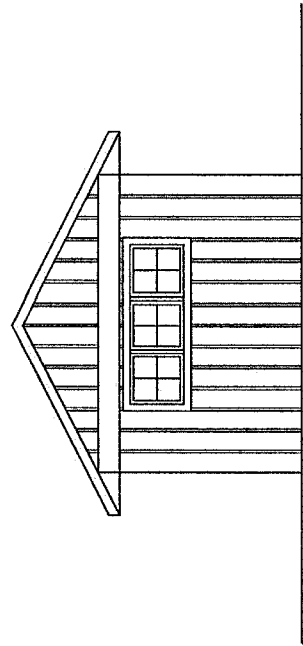
CNL CONSTRUCTION, INC.

T RUST

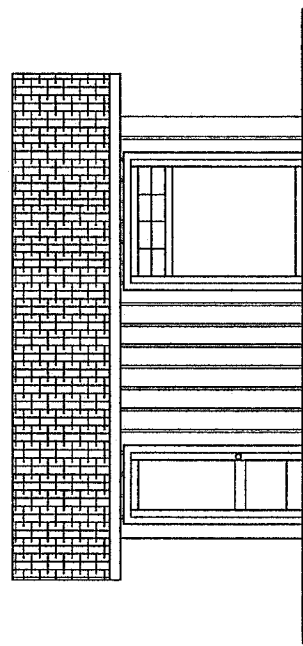
2



NORTH ELEVATION



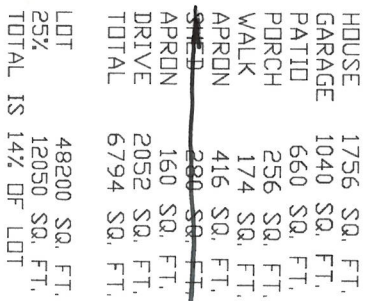
SOUTH ELEVATION



WEST ELEVATION

CAUTION: THESE PLANS AND ANY ACCOMPANYING SPECIFICATIONS
 HAVE NOT BEEN PREPARED BY A REGISTERED ARCHITECT OR ENGINEER
 FOR CONSTRUCTION PURPOSES OR THAT THEY ARE NOT TO BE USED
 FOR CONSTRUCTION PURPOSES WITHOUT THE ASSISTANCE OF A
 QUALIFIED PROFESSIONAL PERSONNEL. YOU SHALL BE A

NANCY'S DRAFTING & DESIGN			
1/4"=1'-0"		(218)841-5253	
8/2024		NMB	
CNL CONSTRUCTION, INC.			
M. DAY		1	



27" ~~27"~~ 141

Dr. Lee

8888, 725-1889, 00.
8888, 725-1889, 00.