

Permit Number: 2025-005 Date Received: 4-7-25 Parcel Number: 82000990104000

Any questions regarding construction permit please contact City Clerk-Treasurer by calling
218- 302-5996 Ext. 1 or stopping by the city office at 131 Main Street Vergas MN.

Construction Permit Application

To the Vergas Planning Commission 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.
- **Before the construction permit will be reviewed the following must be completed.**

NA

- ☐ ☐ Identify and describe the work to be covered by the permit for which application is being made.
- ☐ ☐ Sketch of the proposed project (Site Plan) including current and proposed structures.
 - ☐ Note the lot size and dimensions and location of proposed project.
- ☐ ☐ Blueprint or Design Drawings must be submitted for any new construction, addition or remodel.
- ☐ ☐ All Property Lines staked
- ☐ ☐ Proposed building site staked.
- ☐ ☐ If along lakeshore –
 - ☐ Ordinary High-Water Level (OHWL) staked.
 - ☐ Current picture of lakeshore must be provided.
 - ☐ Copy of DNR permit for work in public waters.
 - ☐ Wetland Conservation Act Review area marked.

- **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:

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: Laura Osborn

Address of Construction Project: 110 W. Elm St

Mailing Address: _____ Phone: 612-987-4939

1. Permit to (CIRCLE ONE)

Addition ☐ Alter ☐ Build ☐ Demolish ☐ Install ☐ Move ☐ Remodel ☐ Repair

Description of work to be done: Front Door / Back Door replace
repair deck (unattached)
Rain Gutters 60'

Will any of the following be included in your project:

☐ Driveway ☐ Culvert ☐ Tar break-up ☐ Grading on parcel

2. Proposed use of building: (CIRCLE ONE)

Residential Commercial

3. VALUATION (not just your cost) of work being completed: \$ Under \$3000

Building Contractor:

Name: Manz Const License Number: _____ Phone: _____

Plumber: (must have MN License)

Name: _____ License Number: _____ Phone: _____

Electrician:

Name: _____ License Number: _____ Phone: _____

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. I am 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.

I am the (CIRCLE ONE) OWNER LESSEE PURCHASER AGENT

4. APPLICANT'S SIGNATURE: [Signature] DATE: 4/7/25

Permit expires in one year if project is not complete, please reapply for permit.

By signing this application, you are giving City employees and representatives permission to inspect your property.

CONSTRUCTION APPLICATION SITE PLAN DESIGN Provided on separate sheet must include the following.

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 _____

City of Vergas has 60 days to approve or deny a permit. The date begins when all documents have been submitted to the city. Permits are valid for one year.

FOR OFFICE USE ONLY

\$ _____ Water Hook-up \$ _____ Sewer Hook-up
\$ 30 Permit Fee \$ _____ Tar Break Up Deposit
\$ 30 Total Fees

Receipt # 2 Date Paid 4/7, 2025

Signature: [Signature] Date: 4/28, 2025
(Permitting Authority)

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