



# CITY OF PILLAGER

306 Elm Ave. W.  
Pillager, MN 56473  
(218) 746-3322

## BUILDING PERMIT APPLICATION

### FOR OFFICE USE ONLY

PERMIT NO. \_\_\_\_\_

DATE: \_\_\_\_\_

### PROJECT VALUE

\_\_\_\_\_

### FEES

PERMIT FEE \_\_\_\_\_

PLAN REVIEW FEE \_\_\_\_\_

PLUMBING FEE \_\_\_\_\_

MECHANICAL FEE \_\_\_\_\_

WATER METER FEE \_\_\_\_\_

OTHER \_\_\_\_\_

STATE SURCHARGE FEE \_\_\_\_\_

**SUB TOTAL** \_\_\_\_\_

### CITY FEES

SAC \_\_\_\_\_

WAC \_\_\_\_\_

WATER TAP \_\_\_\_\_

SEWER TAP \_\_\_\_\_

OTHER \_\_\_\_\_

**SUB TOTAL** \_\_\_\_\_

**TOTAL FEE** \_\_\_\_\_

### CODE ANALYSIS

TYPE OF CONST. \_\_\_\_\_

USE OF BLDG. \_\_\_\_\_

OCCUPANCY GROUP \_\_\_\_\_

OCCUPANCY LOAD \_\_\_\_\_

**ZONING DISTRICT** \_\_\_\_\_

**VARIANCE GRANTED, DATE** \_\_\_\_\_

### CONDITIONAL USE PERMIT

\_\_\_\_\_

### OFF STREET PARKING

SPACES REQ. \_\_\_\_\_

SPACES ON PLAN \_\_\_\_\_

### FIRE SPRINKLERS REQUIRED

YES  NO

### CERTIFICATE OF OCCUPANCY ISSUED

DATE \_\_\_\_\_ BY \_\_\_\_\_

**BUILDING OFFICIAL**  
**TIM CAUGHEY**  
**218-831-2652**

CONTRACTOR'S NAME		1. CONTRACTOR'S LIC. NO.	
2. SITE ADDRESS			
3. OWNER (Name)		(Address) (Tel. No.)	
4. DESCRIPTION OF PROJECT			
5. ARCHITECT (Name) (Address) (Tel. No.)			
5. BUILDER (Name) (Address) (Tel. No.)			
7. TYPE OF WORK Fireplace <input type="checkbox"/> Septic <input type="checkbox"/> Heating <input type="checkbox"/> Plumbing <input type="checkbox"/> Reroofing <input type="checkbox"/> New Construction <input type="checkbox"/> Alterations <input type="checkbox"/> Additions <input type="checkbox"/> Finish Attic <input type="checkbox"/> Residing <input type="checkbox"/> Finish Basement <input type="checkbox"/> Porch <input type="checkbox"/> Garage <input type="checkbox"/> Chimney <input type="checkbox"/> Misc. _____			
8. SIZE OF STRUCTURE (Height) (Width) (Depth)	9. NO. OF STORIES	10. ESTIMATED VALUE	
11. COMPLETION DATE	12. PROPERTY DIMENSION Width Depth	13. NO. OF FAMILIES (if applicable)	
14. PROPOSED ELEVATION IN RELATION TO CURB OR WATERWAY. _____ ELEV.	15. PROPERTY AREA OR ACRES Sq. Ft.	16. CULVERT SIZE Yes No	
17. FRONT YARD Set Back from road property Ft.	18. REAR YARD Set Back Ft.	19. SIDE YARD Set Back _____ Right Sd. _____ Left Sd.	

**ALL ELECTRICAL MUST BE INSPECTED BY THE STATE OF MINNESOTA, 218-822-3003.**

### ACKNOWLEDGEMENT AND SIGNATURE:

The undersigned hereby agrees that, in case such permit is granted, that all work which shall be done and all materials which shall be used shall comply with the plans and specifications therefore herewith submitted and with all the ordinances of said City applicable thereto.

**SITE PLAN ATTACHED**  YES  NO

APPROVED BY ZONING

DATE

SIGNATURE OF APPLICANT

DATE

APPROVED BY BUILDING OFFICIAL

DATE

**SITE PLAN**

**Include:** Property lines, water features, existing and proposed structures, septic systems, wells and roads. Include all setbacks to features.