



# 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**  
 218-822-4540

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

**PREFERRED CONTACT**  
218-831-2652

SIGNATURE OF APPLICANT

DATE

APPROVED BY BUILDING OFFICIAL