

# KANDIYOHI COUNTY BUILDING PERMIT APPLICATION

Date Received \_\_\_\_\_ Received By \_\_\_\_\_ Permit # \_\_\_\_\_

## **APPLICANT COMPLETE INFORMATION BELOW**

Project Address \_\_\_\_\_ Parcel # \_\_\_\_\_

Legal Description \_\_\_\_\_

\_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_

Property Owner \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

General Contractor \_\_\_\_\_ License # \_\_\_\_\_ Phone # \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ License # \_\_\_\_\_ Phone # \_\_\_\_\_

Electrical Contractor \_\_\_\_\_ License # \_\_\_\_\_ Phone # \_\_\_\_\_

Mechanical Contractor \_\_\_\_\_ Phone # \_\_\_\_\_

- PROPOSED USE:**
- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Dwelling      | <input type="checkbox"/> Private Garage      | <input type="checkbox"/> Home Addition      |
| <input type="checkbox"/> Pole Building | <input type="checkbox"/> Finished Basement   | <input type="checkbox"/> Three Season Porch |
| <input type="checkbox"/> Deck          | <input type="checkbox"/> Business/Commercial | <input type="checkbox"/> Other _____        |

Description of project \_\_\_\_\_

Dimensions \_\_\_\_\_ Lot Size/Dimensions \_\_\_\_\_ Project Cost \_\_\_\_\_

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Name of Applicant (Please Print) \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **COUNTY USE ONLY**

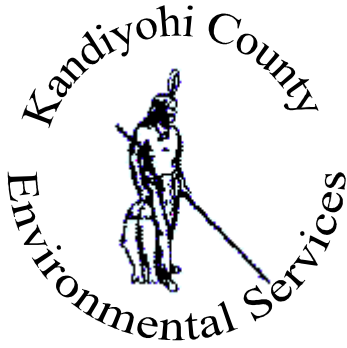
**PLANNING:** Zoning District \_\_\_\_\_ Septic Information \_\_\_\_\_

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

Subject to the following conditions \_\_\_\_\_

**BUILDING:** Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

Subject to the following conditions \_\_\_\_\_



# Property Owner Waiver

## Minnesota State Contractor Licensing Requirements

The purpose of this form is to have property owners acknowledge their responsibilities to the Minnesota State Building Code, to Zoning Ordinances, and to other applicable rules and regulations when they are acting as general contractor in building projects.

I understand that the State of Minnesota requires that all Residential Building Contractors, Remodelers and Roofers, obtain a State License unless they qualify for a specific exemption from the licensing requirements. By signing this waiver, I attest to the fact that I am building or improving my property by myself. I claim to be exempt from the State License requirements because I am not in the business of building on speculation or for resale and this is the first residential structure that I have built or improved in the past 24 months.

I acknowledge that because I do not have a State License, I forfeit any mechanics lien rights to which I may otherwise have been entitled under Minnesota State Statute 514.01.

I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this property. Some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting, remodeling, and/or roofing activity is a misdemeanor under Minnesota State Statute 326.92, subdivision 1, and that I forfeit my rights to reimbursement from the Contractors Recovery Fund in the event that any contractors that I hire are unlicensed.

I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the State Building Code and/or jurisdictional Ordinance in connection with the work performed on this property.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Project Address, City, State and zip code

\_\_\_\_\_  
Date

\*Licensed residential building contractors and remodelers are covered by the recovery fund. Licensed residential roofers and manufactured home installers are not covered by the recovery fund but are required to hold a surety bond.

To determine whether a particular contractor is required to be licensed, or to check on the licensing status of an individual contractor, call the Minnesota Department of Labor and Industry, Licensing Division, at (651) 284-5065, or toll-free at 1-800-342-5354.

# SITE PLAN

Name \_\_\_\_\_ Tax Parcel Number \_\_\_\_\_

## Information to be included on site plan

\_\_ Location & size of **ALL** existing & proposed structures \_\_ Distance from lake, road, property lines

\_\_ Location of well & septic \_\_ Location of roads & driveways

Overall Height \_\_\_\_ Side Wall Height \_\_\_\_ Fill Soil Brought In \_\_\_\_ Removed \_\_\_\_

Any Wetland Alterations Yes No --- Walkout Basement Yes No --- Any Commercial Purposes Yes No

Minimum Prop. Line Setbacks	Minimum Road Setbacks	Minimum Lake Setbacks	Minimum Rear Yard Setbacks	Maximum Story Height	Maximum Building Height	Maximum Impermeable Surface Coverage
R-1, RM 10 ft.	65 ft.	Gen. Dev. 75 ft.	A-1, A-2 10 ft.	A-1, A-2 2 ½	A-1, A-2 30 ft.	A-1 & A-2 30%
Nat.Env. Lake 20 ft.	80 ft.	Rec. Dev. 100 ft.	R-1,R-2,R-3,RM (Dw) 40 ft.	R-1, RM 2 ½	R-1, RM 25 ft.	R-1 & RM 25%
A-1 & A-2 10 ft.	100 ft.	Nat. Envir. 150 ft.	R-1,R-2,R-3,RM (Acc) 10 ft.	R-2 & R-3 2 ½	R-2 25 ft.	R-2, & R-3 30%
R-2 & R-3 10 ft.	130 ft.		CI (Com.) 10 ft.		R-3 25 ft.	CI 75%
CI 10 ft.	150 ft.				CI 40 ft.	

**NORTH** ↑



# SITE DRAWING EXAMPLE - New Construction: Shed

