BUILDING PERMIT APPLICATION #_______

General - Miscellaneous

CITY OF DUNDAS
BUILDING INSPECTIONS DEPARTMENT
100 RAILWAY STREET NORTH, PO BOX 70, DUNDAS, MN 55019
Phone: 507-645-2852     Email: cityhall@dundas.us     Website: www.cityofdundas.org

JOB SITE ADDRESS
LOT#_______    BLK#_________   PID # __________________________________________

APPLICANT: Owner OR Contractor (Circle One)

OWNER __________________________________________ PHONE #s __________________________
Street Address ________________________________________________________________

CONTRACTOR __________________________________________ PHONE #s __________________________
Mailing Address ________________________________________________________________
Contractor’s License # __________________________

TYPE OF WORK (DESCRIBE IN DETAIL): __________________________________________

VALUATION OF WORK (EXCLUDING LAND) __________________________________________

NOTE: A survey by a registered surveyor is required for all permit applications in subdivisions platted after January 1, 1997, or as required by the Building Official (this may be waived for minor additions). If a survey is not required, a Plat Plan must be submitted.

Applicant hereby agrees that, upon issuance of this permit, all work shall be done and all materials used shall be in compliance with applicable City, County, and State laws and ordinances. The applicant agrees to abide by all Zoning Regulations and State Building Codes and to use this structure for its permitted use only.

__________________________________________  ______________________________
Contractor/Applicants Signature                   Date

Permit shall be null and void if authorized work is not started within 180 days from approved date, or if work is suspended or abandoned for 180 days or more after work is started.

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(A)____Residential   (B)____Commercial

ZONING ADMINISTRATOR: _____REVIEWED  By: ______________________ Date: __________
Comment:________________________________________________________________________

BUILDING OFFICIAL/DESIGNEE _____ REVIEWED _____ DENIED ________________________
Signature  Date

Subject to existing regulations and the following conditions

<table>
<thead>
<tr>
<th>PERMIT FEES</th>
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<tbody>
<tr>
<td>Building</td>
<td>$__________</td>
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<tr>
<td>Plan Check Fee</td>
<td>$__________</td>
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<tr>
<td>Building State Surcharge</td>
<td>$__________</td>
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<tr>
<td>Plumbing Permit</td>
<td>$__________</td>
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<tr>
<td>Mechanical Permit</td>
<td>$__________</td>
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<tr>
<td>Other Charges</td>
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<tr>
<td><strong>TOTAL:</strong></td>
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MISC-092020