



2415 Wilshire Blvd
 Mound, MN 55364
 Phone 952-472-0607
 Fax 952-472-0620

- Handout Given
 Lead Handout Given

BUILDING PERMIT

Routed to MNSPECT

TO BE FILLED OUT BY APPLICANT - INCOMPLETE APPS MAY NOT BE PROCESSED

SITE ADDRESS: _____ **PID:** _____

- 1) Was the home constructed before 1978? (YES , continue with line 2, NO continue without completing EPA Section)
- 2) Will the work disturb ≥6 sq ft of interior painted surfaces or ≥20 sq ft of exterior painted surfaces? (YES go to line 4, NO line 3)
- 3) Are there any windows being replaced? (YES , go to line 4, NO continue without completing EPA Section)
- 4) Has this home been Certified Lead Free? (YES , you MUST Attach Certification Information, NO complete line 5)
- 5) EPA Contractor Certification Number: **NAT** -

PROPERTY OWNER: _____ **Address:** _____

City: _____ State: _____ Zip: _____ Email: _____

Contact Name: _____ Phone: _____

CONTRACTOR: _____ **Address:** _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Contractor License No: _____ **Contact Name:** _____ **Phone:** _____

Email: _____

ARCHITECT: _____ **Address:** _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Email: _____ **Contact Name:** _____ **Phone:** _____

TYPE OF WORK:	<input type="checkbox"/> New Construction	<input type="checkbox"/> Deck	<input type="checkbox"/> Re-Roof
<input type="checkbox"/> Commercial <input type="checkbox"/> Residential	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Pool	<input type="checkbox"/> Re-Side
EST. VALUATION OF WORK	<input type="checkbox"/> Finish Basement	<input type="checkbox"/> Retaining Wall	<input type="checkbox"/> Shed _____
\$ _____	<input type="checkbox"/> Remodel	<input type="checkbox"/> Porch	<input type="checkbox"/> Window/Door Replacement
<i>Square feet:</i> _____	<input type="checkbox"/> Addition	<input type="checkbox"/> Demolition	<input type="checkbox"/> # being replaced _____
Detailed Description of Work:	<input type="checkbox"/> Garage-Attached/Detach	<input type="checkbox"/> Misc Other	<input type="checkbox"/> Misc Other
	<input type="checkbox"/> Accessory Structure		

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative, is required and authorizes the Zoning Administrator or designee and the Building Official or designee to enter upon the property to perform needed inspections. Entry may be without prior notice. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions and to abide by all ordinances of the Municipality and the laws of the State of Minnesota regarding actions taken pursuant to this permit. **I agree to pay all plan review fees even if I choose not to proceed with the work.** Permit expires when work is not commenced within 180 days from date of permit, or if work is suspended, abandoned, or not inspected for 180 days. Work beyond the scope of this permit, or work without a permit or inspection, will be subject to a penalty.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

PRINTED NAME: _____ Owner Contractor Owner's Representative

OCCUP. TYPE: _____ **CONST. TYPE:** _____ **CODE:** _____ **BLDG SPRINKLED** Yes / No

VALUATION: \$ _____ **COPIED** _____ **APPROVED** _____

Permit Fee: \$ _____ Plan Review Fee: \$ _____ State Surcharge: \$ _____ Site Inspection Fee: \$ _____ S.E.C. Fee: \$ _____ Investigation fee / Other Fee: \$ _____ Copy Charge (\$.25 per 8.5 x11 page) \$ _____ License Check (\$5) / Lead Check (\$5) \$ _____ Sub Total \$ _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">ZONING</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td>CITY ENG/DPW</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PUBLIC WORKS</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>ASSESSING/UTIL BILL</td> <td></td> <td>UTIL</td> <td>TAX</td> <td>OTHER</td> <td></td> </tr> <tr> <td>BUILDING OFFICAL</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	ZONING						CITY ENG/DPW						PUBLIC WORKS						ASSESSING/UTIL BILL		UTIL	TAX	OTHER		BUILDING OFFICAL					
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BUILDING OFFICAL																															

Special Conditions/Required Setbacks: _____

Building Approval By: _____ **DATE:** _____

Printed Building Approval By: _____ License Verification Lead Verification - Checked By:

City Approval By: _____ **DATE:** _____

Information supplied on this form will be considered public according to the MN Government Data Practices Act.
 See reverse side for an important statement regarding Indian Mounds.

Supplemental Information for Building Permits – Indian Mounds and Earthwork Sites

Applicant is advised that there are historic Indian burial mounds and/or earthwork sites in and around the City of Mound. While many of the mounds have been severely impacted by development over the years, the mounds do receive protection under state law and penalties are imposed for unauthorized disturbance of mounds.

The City maintains some general information about possible sites in an inventory of the “Earthwork/Mound/Burial Areas” contained on the Cultural Resources Map in the Mound Comprehensive Plan and in surveys of the burial sites from Hill and Lewis in 1911 but the completeness or accuracy of this information is unknown. Additional information may be obtained through the Minnesota State Archeologist.

Any formal investigation of a site, including a determination of whether a mound or burial area exists on a subject site, is the responsibility of the property owner or developer. The issuance of permits by the City to do work on a site does not relieve the owner or the developer of that responsibility.