



CITY OF OSSEO, MN
BUILDING PERMIT

Permit No. _____

Date _____

CONTRACTOR'S LICENSE NO		1. DATE		FEES	
2. SITE ADDRESS		ZIP CODE			
3. LEGAL DESCRIPTION PROPERTY I.D. NO. SECTION _____ LOT _____ BLOCK _____ ADDITION _____ PLAT NUMBER _____ PARCEL NUMBER _____				PERMIT FEE _____ PLAN CHECK FEE _____ INVESTIGATION FEE _____ ENGINEERING FEE _____ SITE FEE _____ DRIVEWAY FEE _____ CULVERT \$ _____ FIREPLACE _____ /SC _____ PLUMBING FEE _____ /SC _____ SEPTIC FEE _____ MECHANICAL FEE _____ /SC _____ WATER METER FEE _____ WATER FEE _____ SEWER FEE _____ SURCHARGE FEE _____ ADMIN. FEE _____ OTHERS _____ CONTRACTORS LICENSE _____ TOTAL FEE _____	
4. OWNER (Name) (Address) (Tel. No.)					
5. ARCHITECT (Name) (Address) (Tel. No.)					
6. BUILDER/CONTRACTOR (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"/> Addition <input type="checkbox"/> Finish Basement <input type="checkbox"/> Residing <input type="checkbox"/> Deck <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			
11. COMPLETION DATE		12. PROPERTY DIMENSION Width Depth			
14. PROPOSED ELEVATION IN RELATION TO CURB OR WATERWAY. _____ ELEV.		15. PROPERTY AREA OR ACRES Sq. Ft.		ZONING DISTRICT _____	
17. FRONT YARD set back from road property Ft.		18. REAR YARD set back Ft.			
20. MISCELLANEOUS CONTACT EMAIL ADDRESS:		10. ESTIMATED VALUE		VARIANCE GRANTED, DATE _____	
_____		13. NO. OF FAMILIES (if applicable)			
_____		16. CULVERT SIZE Yes No		OFF STREET PARKING	
_____		19. SIDE YARDS set back _____ Right Sd. _____ Left Sd.			
_____		_____		MATERIAL FILED W/APPLICATION	
_____		_____			
_____		_____		FIRE SPRINKLERS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
_____		_____			
_____		_____		SPECIAL APPROVALS	
_____		_____			
_____		_____		CERTIFICATE OF OCCUPANCY ISSUED	
_____		_____			
_____		_____		DATE _____ BY _____	

SPECIAL CONDITIONS It is my responsibility to locate and establish the elevations if needed of all site improvements. Required adjustments at my expense.

ACKNOWLEDGMENT 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 herewith submitted and with all the ordinances of said CITY OF OSSEO applicable thereto.

Return applications to: permits@ci.osseo.mn.us or fax: 763-425-1111
City of Osseo, 415 Central Ave, Osseo, MN 55369

SIGNATURE OF APPLICANT _____

City Copy

APPROVED BY BUILDING INSPECTOR _____

Inspector's Copy

Applicant's Copy

Assessor's Copy