

Applicant to complete up to "Office Use Only" section.

SITE ADDRESS	DATE
--------------	------

OWNER Name / Address / City / State / Zip Code

Property I.D.#	Daytime Telephone
<input type="checkbox"/> Commercial <input type="checkbox"/> Residential ESTIMATED VALUE OF WORK TO BE PERFORMED	<input type="checkbox"/> FENCE <input type="checkbox"/> Fence Height _____ <input type="checkbox"/> Material of Fence - _____ <input type="checkbox"/> Near City/County Property <input type="checkbox"/> Signatures Provided (back)
	<input type="checkbox"/> UTILITY SHED <input type="checkbox"/> Size of Structure - _____ <input type="checkbox"/> Rear/Side Easement >5' <input type="checkbox"/> 10' or > distance from Primary Structure
	<input type="checkbox"/> CAR PORT <input type="checkbox"/> Size of Structure - _____ <input type="checkbox"/> Location - _____

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative is required and authorizes the City of Belle Plaine Zoning Administrator or designee and the City of Belle Plaine 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 of the ordinances of the City and the Laws of the State of Minnesota regarding actions taken pursuant to this permit.

Permit expires when building and work is not commenced within 180 days from date of Permit issued, or if building and work suspended, abandoned or not inspected for 180 days.

SIGNATURE OF APPLICANT: _____ DATE: _____

BUILDER INFORMATION

BUILDER Name / Address / City / State / Zip / Daytime Telephone	Contractors License No.
--	-------------------------

SPECIAL CONDITIONS OF PERMIT:

This Area for Office Use Only:

FENCE SETBACKS			
ACTUAL: Front <u>N/A</u>	Rear _____	Side _____	Side _____
REQUIRED: Front <u>N/A</u>	Rear <u>2'</u>	Side <u>2'</u>	Side <u>2'</u>

Zoning Class:	UTILITY SHEDS AND CARPORT SETBACKS		
ACTUAL: Front <u>N/A</u>	Rear _____	Side _____	Side _____
REQUIRED: Front <u>N/A</u>	Rear <u>5' or Easement</u>	Side <u>5', 10' or 20'</u>	Side <u>5' or 10'</u>

PERMIT VALUATION:	<p>CITY FEES</p> Permit Fee: \$ <u>35.00</u> Other: \$ _____ TOTAL \$ <u>35.00</u>
-------------------	--

Form of Payment _____ Receipt _____ Date _____ By _____

BUILDING OFFICIAL APPROVAL BY: _____ DATE: _____

ZONING ADMINISTRATOR: _____ DATE: _____