

APPLICATION FOR BUILDING PERMIT CITY OF NICOLLET 401 Pine Street, P.O. Box 547, Nicollet, MN 56074 (507) 232-3474	Box 1	For City Use Only: Building Permit No. <u> N - 2024 - </u> Date Received _____ Date Paid _____	Box 2
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Residential R1 <input type="checkbox"/> House or House Addition \$ _____ R2 <input type="checkbox"/> Remodel (Applicant Valuation) \$ _____ R3 <input type="checkbox"/> Attached Garage \$ _____ R4 <input type="checkbox"/> Deck/Porch \$ _____ R5 <input type="checkbox"/> Detached Garage/Accessory \$ _____ R6 <input type="checkbox"/> Modular/Manufactured Home \$ _____ R7 <input type="checkbox"/> Plumbing and/or Mechanical \$ _____ Commercial C1 <input type="checkbox"/> Architect-Engineer - Required \$ _____ C2 <input type="checkbox"/> Architect-Engineer - Not Requ \$ _____	Box 3	Maintenance - Residential M1 <input type="checkbox"/> Plumbing M2 <input type="checkbox"/> Mechanical M3 <input type="checkbox"/> Reroof M4 <input type="checkbox"/> Siding M5 <input type="checkbox"/> Windows/Door - Same Size/Smaller *** Enlarged Size - Requires remodeling permit (R2) M6 <input type="checkbox"/> Miscellaneous Repair Demolition (Asbestos Inspection & lab fees not included) D1 <input type="checkbox"/> Residential(Based on valuation - \$ 100.00 minimum) D2 <input type="checkbox"/> Commercial(Based on valuation - \$ 100.00 minimum)
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Please Print: Job Site Address _____ Owner's Name _____ Email: _____ Owner's Address _____ Owner's Telephone Number _____ Contractor Name _____ License No. _____ Contractor Address _____ Phone No. _____ Parcel Number _____ Legal Description _____ Description of Proposed Work _____	Box 4
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Use of Structure If this is a residential property - was it built prior to 1978? Yes ___ No ___ Will this project involve the disturbance of any lead-painted materials? Yes ___ No ___ Contractors Lead License#: _____ Every permit issued shall become invalid unless the work authorized by the permit is commenced within 180 days after its issuance, or if the work authorized by the permit is suspended or abandoned for a period of 180 days after the time the work commenced. Building permit card shall be posted in an easily accessible location at the job site during construction for the Building Official to sign off as inspections are completed. No part of any building area authorized by this permit may be occupied until final inspection and issuance of a Certificate of Occupancy (if applicable) by the Building Official. DO NOT BEGIN CONSTRUCTION UNTIL THIS PERMIT HAS BEEN VALIDATED AND BUILDING SETBACK LINE HAVE BEEN APPROVED BY THE ZONING ADMINISTRATOR. Printed Name of Applicant: _____ Signature of Applicant: _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Applicant's Valuation of Work:</td> </tr> <tr> <td style="text-align: center;">_____</td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">NOTE: TWO SETS OF PLANS ARE REQUIRED WITH YOUR BUILDING PERMIT APPLICATION</td> </tr> </table>	Applicant's Valuation of Work:	_____	NOTE: TWO SETS OF PLANS ARE REQUIRED WITH YOUR BUILDING PERMIT APPLICATION
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The issuance of this permit does not initiate an automatic inspection request. It shall be the duty of the permit holder or their agent to notify the building official that such work is ready for inspection (See IRC Sec. 109.3 and IBC Sec. 109.5)

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FOR INSPECTIONS CALL 320-226-5189	Box 6
APPROVED FOR ISSUANCE BY: _____ <div style="display: flex; justify-content: space-between;"> Signature of Building Official Date </div>	Box 7

Type of Construction _____	Occupancy Class _____
For Inspections, please contact: Darin Haslip @ 320-226-5189	