

BUILDING PERMIT APPLICATION*

OFFICE OF BUILDING AND HOUSING HIBBING CITY HALL
Telephone (218) 262-3486

(please print or type)

OWNER _____	ADDRESS OF PROPERTY _____	ZIP _____	ZONING DISTRICT _____
(Applicant shall be responsible to provide full legal description and parcel code. Use tax statement when appropriate) <input type="checkbox"/>			
LEGAL DESCRIPTION _____	(See Attachment)		
MAILING ADDRESS _____	ZIP _____	PHONE _____	
NAME AND ADDRESS OF CONTRACTOR _____	LICENSE NUMBER _____	ZIP _____	PHONE _____
NAME AND ADD. OF ARCHITECT OR DESIGNER _____	ZIP _____	PHONE _____	
PROJECT DESCRIPTION (Generally describe the proposed construction and include building dimensions for new construction or additions)			
CLASSIFICATION OF USE <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
Residential # Dwelling Units _____	Manufactured Home	Commercial	Industrial
<input type="checkbox"/> Garage	<input type="checkbox"/> Warehouse Storage	<input type="checkbox"/> Other (specify) _____	Agricultural
TYPE OF IMPROVEMENT <input type="checkbox"/>			
New	Addition	Alteration	Repair
Demolition	Moving	Installation (ie, windows, siding) <input type="checkbox"/> Roof <input type="checkbox"/> Foundation Only <input type="checkbox"/>	
BASE COST \$ _____			
To be installed but not included in the above cost			
a. Electrical _____	b. Plumbing _____	c. Heating, air conditioning _____	d. Other (elevator, etc.) _____
PROJECT VALUATION (Total Cost: Materials & Labor) \$ _____			
SBC PROJECT VALUATION (Bldg. Official's) \$ _____			
SEWER DISPOSAL AND WATER SUPPLY			
Approval prior to building permit approval for <u>new construction/hook ups</u>			
Approved by: _____			
Sewer <input type="checkbox"/> Public (City Engineer)	<input type="checkbox"/> Private (County Health Dept.)	Other(Specify) <input type="checkbox"/> Wood <input type="checkbox"/> Structural Steel	
Septic Permit #) _____		<input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Masonry (wall bearing)	
Water <input type="checkbox"/> Public (Public Utilities Commission)	<input type="checkbox"/> Private	Lot Size (sq. ft. or no. acres) _____	
Number of stories _____			
Total size of structure (sq. ft.) _____			
Size of new construction (sq. ft.) _____			
NOTICE FOR THE APPLICANT:			
APPLICANT MUST PROVIDE COMPLETE CONSTRUCTION PLANS FOR ALL BUILDING PERMIT APPLICATIONS. APPLICANT MUST PROVIDE SITE PLAN TO SCALE - WITH DIMENSIONS, SETBACKS OF ALL EXISTING AND PROPOSED STRUCTURES ON LOT. SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, AND THE USE OF PUBLIC PROPERTY SUCH AS STREETS, SIDEWALKS, ALLEYS, ETC. INCOMPLETE APPLICATIONS MAY BE REJECTED.			
APPROVED BUILDING/ZONING PERMITS BECOME NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.			
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.			
SIGNATURE OF APPLICANT _____		DATE _____	
Use pen only - press hard for carbon copies			

PERMIT NUMBER: _____

PARCEL CODE: _____

* This form may also be used for zoning permit, demolition permit, moving permit and/or sign permit applications under the authorization of the Building Official or Zoning Administrator.

NAME _____

ADDRESS OF PROPERTY _____

-INSTRUCTIONS-

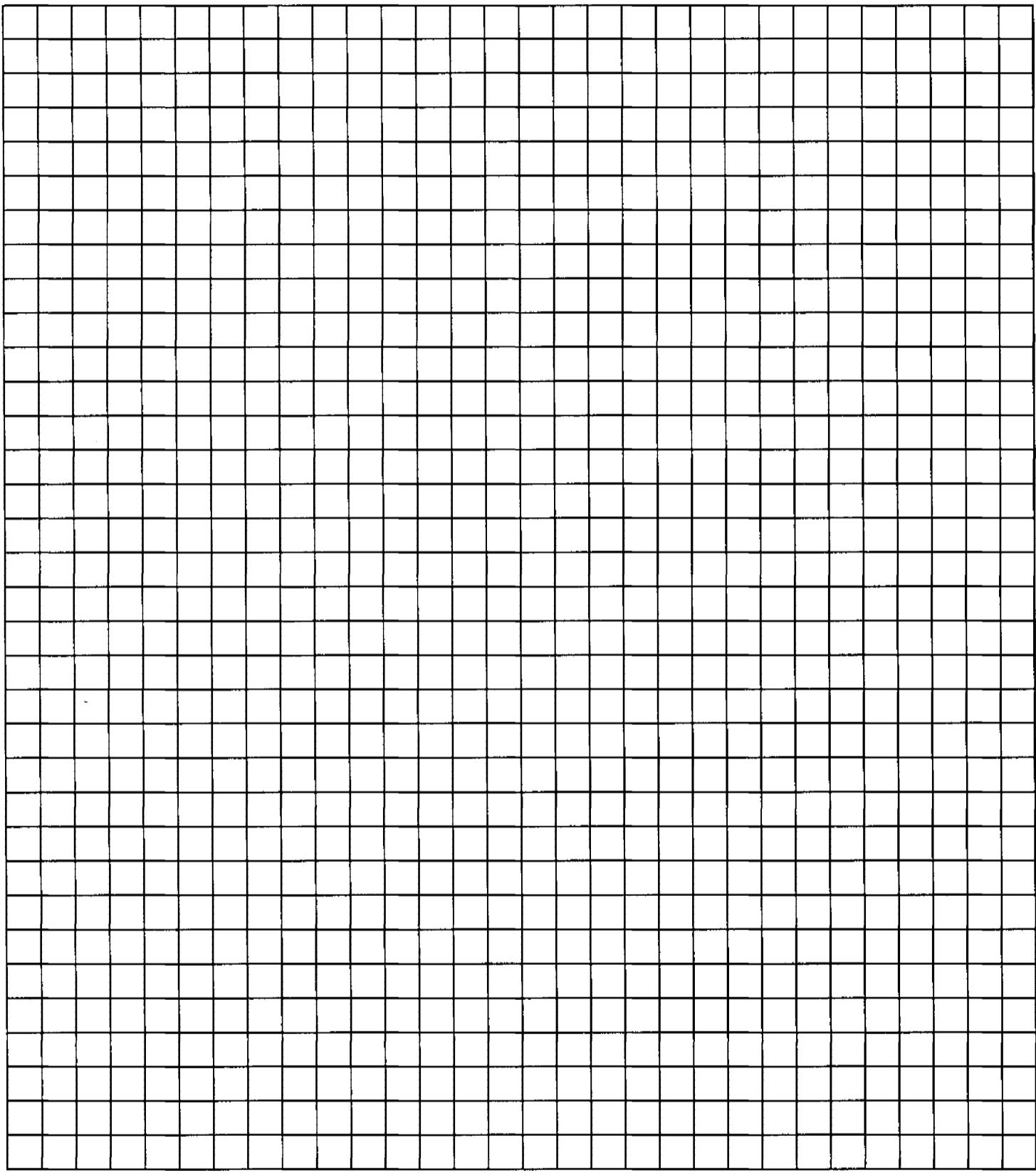
SITE PLAN DRAWN TO SCALE - SHOW DIMENSIONS OF LOT AND ALL EXISTING AND PROPOSED STRUCTURES. SHOW DISTANCES FROM FRONT, SIDE AND REAR PROPERTY LINES TO ALL EXISTING AND PROPOSED STRUCTURES. SHOW ALLEY AND LIST STREET NAMES ABUTTING LOT. SITE PLANS DRAWN BY FREE-HAND WILL NOT BE ACCEPTABLE.

IT IS THE OWNER'S AND/OR APPLICANT'S RESPONSIBILITY TO KNOW THE SUBJECT PROPERTY LINES IN ORDER TO FILE FOR THIS PERMIT.



PLACE AN ARROW IN THE CIRCLE
TO INDICATE THE DIRECTION OF NORTH

GRAPH SQUARES ARE 5'X5' OR 1"=20',
OTHERWISE NOTE SCALE AS FOLLOWS:



I/we as applicant certify that the proposed construction will conform to the dimensions and uses shown above, and that no changes will be made without first obtaining approval.

Applicant's Signature _____ Date _____

Plan Review by _____

OFFICE USE ONLY:

This Is An Application For:

Building Permit

Zoning Permit

Moving Permit

Demolition Permit



Sign Permit

Official's Comments: _____