

ST. JOHN'S TOWNSHIP BUILDING
PERMIT APPLICATION

Date Received _____ Received By _____ Permit # _____

APPLICANT COMPLETE INFORMATION BELOW

Project Address _____ Parcel # _____

Legal Description _____

_____ Township _____ Range _____ Section _____

Property Owner _____ Phone _____

Address _____ City _____ Zip _____

General Contractor _____ License # _____ Phone # _____

Homes constructed prior to 1978 require the contractor to be lead certified effective 2-01-2011.

Was the home constructed prior to 1978? Yes No Contractor Lead Certification # _____

Plumbing Contractor _____ License # _____ Phone # _____

Electrical Contractor _____ License # _____ Phone # _____

Mechanical Contractor _____ Phone # _____

- PROPOSED USE:**
- | | | |
|-------------------|-------------------------|------------------------|
| () Dwelling | () Private Garage | () Home Addition |
| () Pole Building | () Finished Basement | () Three Season Porch |
| () Deck | () Business/Commercial | () Other _____ |

Description of project _____

Dimensions _____ Lot Size/Dimensions _____ Project Cost _____

This permit becomes 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 has 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 give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Name of Applicant (Please Print) _____ Phone # _____

Address _____ City _____ Zip _____

Signature _____ Date _____

TOWN USE ONLY

PLANNING: Zoning District _____ Septic Information _____

Reviewed by _____ Date _____

Subject to the following conditions _____

BUILDING: Reviewed by _____ Date _____

Subject to the following conditions _____

Property Owner Waiver

Minnesota State Contractor Licensing Requirements

The purpose of this form is to have property owners acknowledge their responsibilities to the Minnesota State Building Code, to Zoning Ordinances, and to other applicable rules and regulations when they are acting as general contractor in building projects.

I understand that the State of Minnesota requires that all Residential Building Contractors, Remodelers and Roofers, obtain a State License unless they qualify for a specific exemption from the licensing requirements. By signing this waiver, I attest to the fact that I am building or improving my property by myself. I claim to be exempt from the State License requirements because I am not in the business of building on speculation or for resale and this is the first residential structure that I have built or improved in the past 24 months.

I acknowledge that because I do not have a State License, I forfeit any mechanics lien rights to which I may otherwise have been entitled under Minnesota State Statute 514.01.

I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this property. Some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting, remodeling, and/or roofing activity is a misdemeanor under Minnesota State Statute 326.92, subdivision 1, and that I forfeit my rights to reimbursement from the Contractors Recovery Fund in the event that any contractors that I hire are unlicensed.

I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the State Building Code and/or jurisdictional Ordinance in connection with the work performed on this property.

Signature of Property Owner

Project Address, City, State and zip code

Date

*Licensed residential building contractors and remodelers are covered by the recovery fund. Licensed residential roofers and manufactured home installers are not covered by the recovery fund but are required to hold a surety bond.

To determine whether a particular contractor is required to be licensed, or to check on the licensing status of an individual contractor, call the Minnesota Department of Labor and Industry, Licensing Division, at (651) 284-5065, or toll-free at 1-800-342-5354.

SITE PLAN

Name _____ Tax Parcel Number _____

Information to be included on site plan

____ Location & size of ALL existing & proposed structures ____ Distance from lake, road, property lines

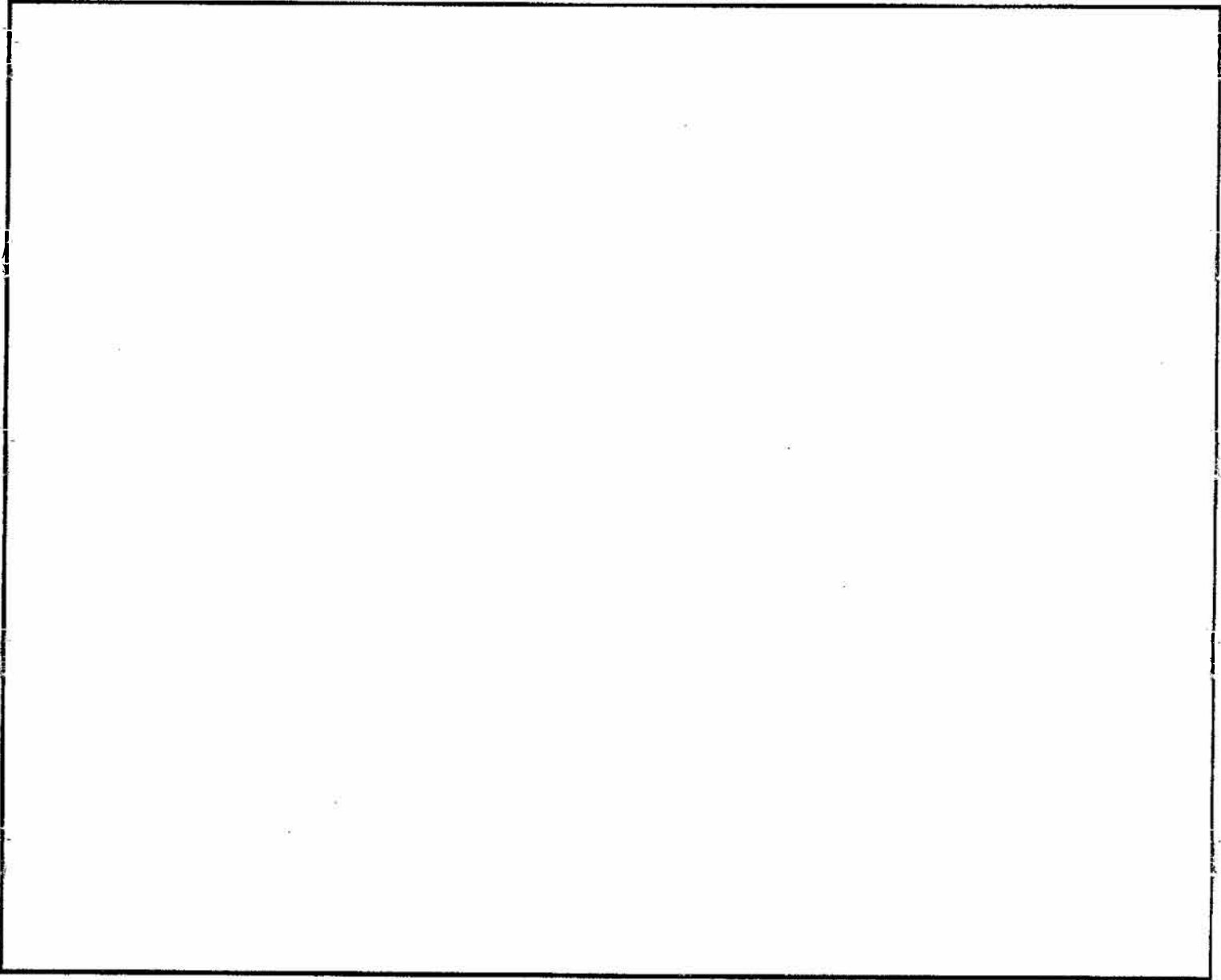
____ Location of well & septic ____ Location of roads & driveways

Overall Height ____ Side Wall Height ____ Fill Soil Brought In ____ Removed ____

Any Wetland Alterations Yes No ---- Walkout Basement Yes No ---- Any Commercial Purposes Yes No

Minimum Prop. Line Setbacks	Minimum Road Setbacks	Minimum Lake Setbacks	Minimum Rear Yard Setbacks	Maximum Story Height	Maximum Building Height	Maximum Impermeable Surface Coverage
R-1, RM 10 ft.	65 ft.	Gen. Dev. 75 ft.	A-1, A-2 10 ft.	A-1, A-2 2 ½	A-1, A-2 30 ft.	A-1 & A-2 30%
Nat. Env. Lake 20 ft.	80 ft.	Rec. Dev. 100 ft.	R-1, R-2, R-3, RM (Dw) 40 ft.	R-1, RM 2 ½	R-1, RM 25 ft.	R-1 & RM 25%
A-1 & A-2 10 ft.	100 ft.	Nat. Envir. 150 ft.	R-1, R-2, R-3, RM (Acc) 10 ft.	R-2 & R-3 2 ½	R-2 25 ft.	R-2, & R-3 30%
R-2 & R-3 10 ft.	130 ft.		CI (Com.) 10 ft.		R-3 25 ft.	CI 75%
CI 10 ft.	150 ft.				CI 40 ft.	

NORTH



SITE DRAWING EXAMPLE - New Construction: Shed

