



**BUILDING PERMIT APPLICATION**

**CITY OF MADISON LAKE**  
**507-243-3011**

CITY OF MADISON LAKE  
 525 MAIN STREET, PO BOX 295  
 MADISON LAKE, MN 56063

**PERMIT #:** \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

**APPLICANT COMPLETE INFORMATION BELOW**

PROJECT ADDRESS: \_\_\_\_\_ PARCEL ID: \_\_\_\_\_  
 PROPERTY OWNER: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

GENERAL CONTRACTOR: \_\_\_\_\_ LICENSE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
 PLUMBING CONSTRUCTOR: \_\_\_\_\_ LICENSE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
 MECHANICAL CONTRACTOR: \_\_\_\_\_ LICENSE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_

PROPOSED USE:  
 DWELLING     PRIVATE GARAGE     HOME ADDITION     DECK     POLE BUILDING  
 FINISH BASEMENT     THREE SEASON PORCH     FURNANCE     BUSINESS/COMMERCIAL  
 FIRE PLACE     SIDING     WATER HEATER     OTHER \_\_\_\_\_

DESCRIPTION OF PROJECT: \_\_\_\_\_

DIMENSIONS:	USE AND OCCUPANCY	TYPE OF CONSTRUCTION:	EST. VALUE:	LOT SIZE/DIMENSIONS:

ACKNOWLEDGEMENT AND SIGNATURE: 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 that the same to be true and correct. All provisions of law 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. 24 hour advance notice on all inspections. Submission of this application does not constitute a permit being issued.

NAME (PLEASE PRINT)                      ADDRESS                      CITY                      STATE                      ZIP CODE

SIGNATURE                                      DATE                                      PHONE #

**CITY USE ONLY**

<b>PLANNING:</b>	MINIMUM SETBACKS REQUIRED		<b>FEES</b>
ZONING DISTRICT:	FRONT:	PERMIT	\$
REVIEWED BY:	SIDE:	PLAN REVIEW	\$
SHORELAND OVERLAY: <input type="checkbox"/> YES <input type="checkbox"/> NO	REAR:	MN SURCHARGE	\$
TOTAL LOT COVERAGE %:	ROAD RIGHT OF WAY:	FIRE PLACE	\$
ZONING APPROVAL:	OTHER:	PLUMBING	\$
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED		MECHANICAL	\$
SUBJECT TO THE FOLLOWING CONDITIONS/ COMMENTS:		WATER METER	\$
		SEWER ACCESS	\$
<b>BUILDING:</b>	DATE:	WATER ACCESS	\$
REVIEWED BY:		LICENSE CK.	\$
SUBJECT TO THE FOLLOWING CONDITIONS:		OTHER	\$
BUILDING INSPECTION APPROVAL:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	<b>TOTAL</b>	<b>\$</b>

**FOR INSPECTIONS CALL 1-877-333-5620 TWENTY FOUR HOURS NOTICE REQUIRED**

ZONING \_\_\_\_\_ DATE APPROVED: \_\_\_\_\_

BUILDING OFFICIAL \_\_\_\_\_ DATE APPROVED: \_\_\_\_\_