

GREENBUSH TOWNSHIP

Office of Building and Zoning
Scot Rosevold

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| |
|----------------------------|
| Permit # GB 25 - |
| Parcel # 06- |

PERMIT APPLICATION INFORMATION

LEGAL DESCRIPTION (Subdivision or Qtr/Qtr)

| SEC | TWP | RANGE | LOT | BLOCK | | Acres |
|---|-----|-------|-----|----------|--|---------------|
| PROPERTY OWNER NAME: | | | | ADDRESS: | | PHONE # _____ |
| | | | | | | CELL # _____ |
| | | | | | | email _____ |
| CONTRACTOR: | | | | ADDRESS: | | PHONE # _____ |
| | | | | | | CELL # _____ |
| LICENSE #: | | | | | | email _____ |
| TYPE OF WORK: ___ NEW ___ ADDITION ___ REMODEL ___ REPAIR ___ MOVE ___ REMOVE ___ DEMO ___ REROOF ___ OTHER | | | | | | |
| TYPE OF STRUCTURE: ___ SFD ___ Garage ___ Deck ___ MfgHome ___ Pole Bldg ___ Grain Bin ___ Other: | | | | | | |
| TYPE OF CONSTRUCTION: ___ Wood ___ Masonry ___ Metal ___ PostFrame ___ Lt. Frame ___ PreFab ___ Other: | | | | | | |
| USE OF BUILDING (example: residential, commercial, agriculture, personal storage, etc.): | | | | | | |
| SIZE OF STRUCTURE : Sq. Ft.: _____ Height: _____ Width: _____ Depth: _____ | | | | | | |
| ESTIMATED MATERIAL AND LABOR COSTS: \$ _____ HEATED: ___ Yes ___ No Type: _____ | | | | | | |

I hereby apply for a building permit and acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes and with the Minnesota Building Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan.

SIGNATURE OF APPLICANT: _____ DATE: _____

Brief Description of work to be performed: _____

| | | | | | | | | | | |
|--|----------|----------|---------|---------|------------|-------------------------------|----------|--|--|--|
| OFFICE USE ONLY Zoning Administrator: ___ Approved ___ Denied Signature: _____ Date: _____ | | | | | | | | | | |
| Road Row | Ctr Road | Front Yd | Side Yd | Rear Yd | Lake/River | Bluffline | District | | | |
| | | | | | | | | | | |
| COMMENTS: _____ | | | | | | | | | | |
| | | | | | | | | | | |
| BUILDING OFFICIAL: ___ Approved ___ Denied | | | | | | Building Permit: _____ | | | | |
| Signature: _____ Date: _____ | | | | | | Plan Review Fee: _____ | | | | |
| Total Sq Ft: _____ Valuation: _____ Sprinkler Yes No | | | | | | State Surcharge: _____ | | | | |
| Use: _____ Occupancy: _____ Const Type: _____ | | | | | | Sewer Permit: _____ | | | | |
| Total Sq Ft _____ No. Stories _____ Occ. Load: _____ | | | | | | Penalty: _____ | | | | |
| | | | | | | Fixed Fee: _____ | | | | |
| | | | | | | Other: _____ | | | | |
| | | | | | | Agricultural use _____ | | | | |
| | | | | | | TOTAL: _____ | | | | |

COMMENTS: _____
