

# City of Osakis Building Permit Application

Permit Number: \_\_\_\_\_

## Inspectron, Inc.

**Commercial Building Inspector / Bill Barber 612-270-4796**

Main Office: 651-322-6626

Toll Free Number: 1-800-322-6153

15120 Chippendale Ave, Suite 202, Rosemount, MN 55068

## City of Osakis

**Office: 320-859-1201 or 320-859-2150**

Fax Number: 320-859-3978

Email: osakiscityls@arvig.net

14 Nokomis St E, PO Box 486, Osakis, MN 56360

Project Address:	Property ID #:
Owners Name:	Owners Phone Number:
Applicants Name (if different):	Applicants Phone Number:
Contractors Name:	Contractors Phone Number:
Contractors State License Number (required):	Expiration Date:
Brief Project Description:	
Completed Value (includes labor and materials):	Starting Date:

### Project Information

Permit Type	Project Use	Type of Construction	Zoning District
<input type="checkbox"/> Building	<input type="checkbox"/> Residential	<input type="checkbox"/> Accessory Building*	<input type="checkbox"/> UR, Urban Reserve
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Commercial	<input type="checkbox"/> Addition *	<input type="checkbox"/> R-1, Low Density Residential
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Interior Remodel*	<input type="checkbox"/> R-O, Old Town Residential
	<input type="checkbox"/> Industrial	<input type="checkbox"/> Deck/Porch*	<input type="checkbox"/> R-2, Medium High Density
	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Foundation Only*	<input type="checkbox"/> RM, Residential Manufactured
	<input type="checkbox"/> Public	<input type="checkbox"/> Siding	<input type="checkbox"/> C-1, Central Commercial
	<input type="checkbox"/> Multi Family (+5)	<input type="checkbox"/> Roofing	<input type="checkbox"/> C-2, General Commerce
		<input type="checkbox"/> Window Replacement	<input type="checkbox"/> C-3, Highway Commercial
		<input type="checkbox"/> Furnace*	<input type="checkbox"/> I-I, General Industrial
		<input type="checkbox"/> New Construction*	<input type="checkbox"/> SO-Shoreline Overlay
		<input type="checkbox"/> Repair	
		<input type="checkbox"/> Sprinkler Installation*	
		<input type="checkbox"/> Sprinkler Maint/Repair	
		<input type="checkbox"/> Demolition/Commercial*	
		<input type="checkbox"/> Fireplace*	
		<input type="checkbox"/> Manufactured Home*	
		<input type="checkbox"/> Fence/Wall*	
		<input type="checkbox"/> Aboveground Pool*	
		<input type="checkbox"/> In Ground Pool*	
		<input type="checkbox"/> Relocation*	

\* Designates more information and/or an additional application is required. Relocation requires pre inspection.

**Notice: Separate permits are required for plumbing, heating, fireplace installation, electrical work and installation of the septic system. The permit shall become null and void unless the work or construction 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 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 give authority to violate or cancel the provision of any other State or Local law regulating construction of the performance of construction. This building permit may be suspended or revoked if the permit has been issued in error or on the basis of incorrect information supplied or in violation of any ordinance or regulation of the City of Osakis. All permit fees and other costs to review the application that are incurred by the City for professional consultants, will be paid prior to issuance of the Building Permit. Interest will not be paid out on escrow dollars and any interest earned on the account will go into the general account for administration fees.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Make check payable to the City of Osakis

For Office Use Only	
DATE RCVD.	
Permit Fee	
Surcharge	
Plan Check	
<b>TOTAL FEE</b>	\$

### Information Reviewed and Checked

By: \_\_\_\_\_ Date \_\_\_\_\_

**City Staff**

**Building Permit Approval**

By: \_\_\_\_\_ Date \_\_\_\_\_

**Commercial Building Official**