



Building Permit Application

Applicant: \_\_\_\_\_

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

Applicant's Address: \_\_\_\_\_

Street Address of Proposed Work: \_\_\_\_\_

Telephone: \_\_\_\_\_ Work \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

To Build: \_\_\_\_\_ X \_\_\_\_\_

Age of Home: Built prior to 1978 \_\_\_\_\_ Yes \_\_\_\_\_ No
[ ] Finished Basement [ ] Walkout [ ] Deck [ ] Central Air [ ] Fireplace

Contractor: \_\_\_\_\_ Contractor's License #: \_\_\_\_\_
(If homeowner, complete next page of application.)

Plumber: \_\_\_\_\_ Electrician: \_\_\_\_\_

THE APPLICANT BY SIGNATURE HERewith AGREES TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAW REGULATING BUILDING CONSTRUCTION UNDER THIS PERMIT.

Applicant Signature: \_\_\_\_\_

Information below this line to be completed by City of Fairmont Building/Inspection Department

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Addition \_\_\_\_\_

Unplatted: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Shoreland Management Area: [ ] Yes [ ] No

Impervious Coverage (%): \_\_\_\_\_

Ind. Sewage Treatment System-Certified Inspection Required: [ ] Yes [ ] No

Type of Construction: \_\_\_\_\_ Occupancy Type: \_\_\_\_\_

Code Name & Edition: \_\_\_\_\_

Cost: \_\_\_\_\_ (total:contractor, electrical, plumbing & heating)

- Building Permit Fee: \_\_\_\_\_
Double Fee: \_\_\_\_\_
Surcharge Fee: \_\_\_\_\_
Plan Check Fee: \_\_\_\_\_
Ind. Sewage Treatment System: \_\_\_\_\_
Sewer Connection: \_\_\_\_\_
Water Connection: \_\_\_\_\_

TOTAL: \_\_\_\_\_ Paid: \_\_\_\_\_

Zoning Official Approval: \_\_\_\_\_ Date \_\_\_\_\_

Building Official Approval: \_\_\_\_\_ Date \_\_\_\_\_

Call Gopher State One Call (GSOC) Before You Dig!!! 1-800-252-1166



Permit Number:

Parcel Number:

## 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 mechanic's 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 Contractor's 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*

\_\_\_\_\_  
*Date*

**Please return this signed waiver with the Building Permit Application.**

To determine whether a particular contractor is required to be licensed, or to check on the licensing status of an individual contractors, call the Minnesota Department of Commerce, Enforcement Division at 651/296-2594, or toll-free at 1-800/657-3602.