Permit Number: 2024-FR- Date Received: _____



CITY OF FRAZEE BUILDING PERMIT APPLICATION Payment for this permit is not refundable after 14 days.

A Licensed Contractor MUST fill out this application unless the property owner is completing the work themselves.

- NO CONSTRUCTION MAY BEGIN UNTIL BUILDING PERMIT APPLICATION HAS BEEN APPROVE
- ALL NEW OR REMODELED BUILDINGS MUST MEET MINNESOTA STATE BUILDING CODE AS ADOPTED BY THE CITY OF FRAZEE. GOPHER STATE ONE MUST BE NOTIFIED 48 HOURS PRIOR TO ANY DIGGING, CALL 1-800-252-1166 AS REQUIRED BY MINNESOTA STATE LAW.
- THE CITY OF FRAZEE WILL CHECK ALL SETBACKS ON ANY NEW CONSTRUCTION. IT IS THE <u>APPLICANT'S</u> RESPONSIBILITY TO HAVE ALL PROPERTY LINES LOCATED.

NEW CONSTRUCTION - ADDRESS MUST BE PROMINENTLY DISPLAYED ON PROPERTY

Property Description										
Parcel Number:										
Address where work is being done:										
Resident/Owner Name: Phone #:										
Address/City/Zip:										
Applicant is:Owner Contractor Owner Email:										
Contractor/Company: Contact:										
Address: City/Zip:										
Phone: License #: Lead Certificate #:										
Type of Work:										
Permit to: (CIRCLE ONE) BUILD INSTALL ADD TO ALTER MOVE DEMOLISH REPAIR										
Describe work to be done:										
Proposed use of building: (CIRCLE ONE) Residential Commercial										
Valuation of work being completed: \$										

On the attached "Site Plan" (page 4), you must show the proposed location of any new building, additions/changes to existing buildings, fences, or sheds in reference to the property lines and existing structures. You must be as accurate as possible in your dimensions. If you have a copy of a professionally prepared site plan, attach a copy for the Building Official to review.

Certification: I hereby certify that I am the applicant herein and that the information given above and/or any

exhibits submitted her	ewith is in all resting is granted, said	pects true and accude construction will	rate to the best o comply with plar	f my knowledge and belief, and ns and specifications herewith						
I am the: (CIRCLE ONE)	Owner	Contractor	Purchaser	Lessee						
Refunds for projects no	ot begun must be	requested within 1	4 days of submissio	on of application.						
Failure to obtain a Bui to the cost of the perm		-		will be subject to a fine equal nit.						
				Application is hereby made by the sas adopted by the City of Frazee.						
				DATE:						
A Licensed Contractor I	MUST fill out this a	pplication. Unless the	e property owner is o	completing the work themselves.						
FOR OFFICE USE ONLY										
\$ Plan I	Review (Comme	rcial Building – <u>only</u>	when plan to revie	ew – not roofing/siding/etc.)						
\$ Plan I	Review (Resider	tial Home Construct	ion – 10% of the b	ase building permit fee)						
\$ Perm	it fee									
\$ Subto	otal									
\$ State	Surcharge (do not	include on payment scl	nedule)							
\$Total	Permit Cost - Rec	eipt #:	Date Paid							
Occupancy Group:		Construction Type: _		Zoning:						
Signature:		D	ate							

Signature above implies that setback requirements have been reviewed and are believed to be correct.

(Building Official)

Property Owner Waiver Minnesota State Contractor Licensing Requirements

THIS FORM MUST BE SIGNED BY ALL PROPERTY OWNERS NOT USING A LICENSED CONTRACTOR PRIOR TO THE ISSUANCE OF THE BUILDING PERMIT.

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 pro	t as the contractor on this project, I am solely and personally responsible for any Building Code and/or jurisdictional ordinance in connection with the work performed
violations of the State Building Code and/or jurisdic	ctional ordinance in connection with the work performed
on this property.	
Signature or Property Owner	Date
Project Address	

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 651-2845065, or toll-free at 1-800/ DIAL-DLI (342-5354).

This page must be completed for new buildings, additions to existing structures, fences, sheds.

Sketch the proposed project below. The sketch <u>must contain</u>: (1) location, dimensions, and total area of the site and (2) location, dimensions, floor area, type of construction, and use of each current and proposed building or structure. If you do not know the lot size or dimensions, contact City Hall at 218-334-4991 for assistance.

I hereby state that the facts on the site plan below are true to the best of my knowledge and belief.

Signature of Applicant Date														