



Email building application to maeghanb@albertvillemn.gov

BUILDING PERMIT APPLICATION

5959 Main Avenue NE
 Albertville, MN 55301
 Phone: 763.497.3384 Fax 763.497.3210

Date Received _____
 Date Notified _____
 Date Paid _____
 Ck, Cash, CC _____
 Permit # _____

Site Address: _____
 Business Name: _____
 The Applicant is: _____ Owner _____ Contractor _____ Tenant

Legal Description: PID # _____
 Addition _____ Lot _____ Block _____

Owner:
 Name _____ Address _____

City _____ State _____ Zip _____

Email _____

Phone (H) _____ (W) _____ (C) _____

Contractor:
 Company Name _____ License # _____

Address _____ City _____ St _____ Zip _____

Contact Person _____ Email _____

Phone: (W) _____ (C) _____ (Fax) _____

Architect:
 Name _____ Address _____

City _____ State _____ Zip _____

E-Mail _____

Phone (W) _____ (C) _____ (Fax) _____

Type of Work:
 New Construction Residential
 New Construction Commercial
 Tenant Finish
 Addition
 Garage/Shed
 Plbg
 Alteration
 Reside/Reroof
 Htg
 Finish Bsmt
 Fireplace
 Deck

Description of Work: _____

Size of Structure: Length _____ Width _____ Height _____
 Total Square Footage: First Floor _____ Second Floor _____ Basement _____ Garage _____

Estimated Valuation of Work: \$ _____

Separate permits are required for electrical, plumbing, heating or fireplace. I hereby apply for the above consideration and declare that the information and materials submitted with this application are in compliance with City Ordinance and Policy Requirements and are complete and accurate to the best of my knowledge. It is applicants responsibility to locate and establish the elevations, if needed, of all site improvements. Required adjustments at owners expense. I understand that all City incurred professional fees and expenses associated with the processing of this request are the responsibility of the property owner and/or applicant and will be promptly paid. If payment is not received from the applicant, the property owner acknowledges and agrees to be responsible.

Applicants Signature _____ Applicants Printed Name _____ Date _____

Approved by Building Official _____ Value Approved _____ Date _____

Special Conditions or Comments: _____

| BUILDING PERMIT FEES | |
|----------------------|-------|
| Permit | _____ |
| Surcharge | _____ |
| Plan Check | _____ |
| Engineering (site) | _____ |
| Mechanical | _____ |
| Fireplace (s) | _____ |
| Plumbing | _____ |
| Sewer | _____ |
| Water | _____ |
| Water Meter | _____ |
| City WAC | _____ |
| JP WAC | _____ |
| SAC | _____ |
| Storm Water | _____ |
| License Check | _____ |
| Other | _____ |
| TOTAL | _____ |

| | |
|-----------------|-------|
| Type of Const. | _____ |
| Use of Bldg | _____ |
| Occupancy Group | _____ |
| Occupancy Load | _____ |
| Zoning | _____ |
| Code Used | _____ |

| Are Fire Sprinklers Required? | | |
|-------------------------------|------------------------------|-----------------------------|
| | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fire Dept. | Date _____ | Approved _____ |
| City Engineer | _____ | _____ |
| Notify of Assoc & Covenant | _____ | _____ |
| Public Works | _____ | _____ |
| City Planner | _____ | _____ |

REVISED 10/09/2024

GOVERNMENT DATA PRACTICES – TENNESSEN WARNING:

The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license/permit without it. The data will constitute a public record if and when the license/permit is granted as such will be available to the general public upon written request. (MN Law M.S.13.41)