Permit Number:	Jate Received: Parcei Number:
C	onstruction Permit Application
To the City Council of the C	ity of Vergas in the County of Otter Tail, State of Minnesota:
	by the undersigned for a Construction Permit as provided by City
Ordinance as adopted by the	
	NE CALL MUST BE NOTIFIED 48 HOURS PRIOR TO ANY
	800-252-1166 AS REQUIRED BY MINNESOTA STATE LAW.
	GAS WILL CHECK ALL SETBACKS ON ANY NEW
	IT IS THE APPLICANT'S RESPONSIBILITY TO HAVE ALL
	OCATED. ALL NEW CONSTRUCTION REQUIRES THE
As a first of the site of the first of the site of the	ARK THE PROPOSED BUILDING SITE AND PROPERTY
LINES BEFORE TH	E BUILDING PERMIT WILL BE APPROVED.
All Electrical work	MUST have an electrical permit, which must be obtained
separately from a N	IN State Contract Electrical Inspector (218)342-3345 or
(218)849-6059.	
Property Description: (N	EW CONSTRUCTION ONLY)
Block قريداران Lot المراكبة	Addition
Property: Width	3 , Addition
	\$1,000 deposit for tar break up. City will reimburse \$1,000 when
	eet is approved by Utilities Superintendent.
project complete and suc	ects approved by cannot supermendent.
PLEASE NOTE: WITH ANY NEW UTILITIES: WATER HOOK-UP	LY CONSTRUCTED HOME, THERE ARE FEES FOR START UP OF ASSESSMENT IS \$750.00, SEWER IS \$750.00.
Name of Applicant: 53	
Address of Construction Proje	11: 105 E. Main St. Vergas, MN 56587
Mailing Address: 49005 (on: 105 E. Main St. Vergas, MN 56587 O Hwy 17 Phone: (218) 841-8643-Jeff (218) 234-1734 CO, MW 56587 - Tyl
Name of Owner (If not the Ap	Slicant):
Address of Owner (If not the A	pplicant):
1. Permit to (€IRCLE O	VE)
Build	Install Addition Alter Demo First Demolish Repair Remodel Build: Oct. 2021
Move	Demolish Repair Remodel Rule 1 100 4 702
Description of work to	be done:
	
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2. Proposed use of buildi	your cost) of work being completed: \$ 1.5 million Cleared
3. VALUATION (not just	your cost) of work being completed: \$ 1.5 million Be
Building Contractor:	Cleared
- * **:	
Name Unknown	License Number: Phone:
Plumber: (must have MN	
Name: Unknown	License Number: Phone:
Electrician:	
Name: 2HZOW Elec	fric License Number: Phone: 248-841-8643
	Form approved by City of Vergas Council 09/12/2017

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4. Attached a "Site Plan", showing the proposed location of any new building in reference to the property including existing buildings. If you have a copy of a professionally prepared site plan, attach a copy for review by the City's Site/Zoning Inspector. Blueprint or Design Drawings must be submitted for any new construction, addition, or remodel.
5. Certification: I hereby certify that I am the applicant herein and that the information given above and/or any exhibits submitted herewith is in all respects true and accurate to the best of my knowledge and belief, and further, if this permit is granted, said construction will comply with plans and specifications herewith submitted and applicable requirements of the City of Vergas.
6. I am the (CIRCLE ONE) OWNER LESSEE PURCHASER AGENT
7. APPLICANT'S DATE: 7/3/2/

FOR OFFICE USE ONLY
\$ Sewer Hook-up
\$ Remit Fee \$ Tar Break Up Deposit
\$Total Fees
Receipt # Date Paid,20
Form given to alient to display the name to be
Form given to client to display the permit to be
visible from the street & to notify office of completion.
•
Signature: Date:, 20
(Permitting Authority)
(Permitting Authority)
(Permitting Authority) Date Approved by Council:
(Permitting Authority) Date Approved by Council:
(Permitting Authority) Date Approved by Council: