Permit Number: Date Received: 10/19/33 Parcel Number:	
Any questions regarding construction permit please contact City Clerk-Treasurer by calling 218-	
302-5996 or stopping by the city office at 111 Main Street Vergas MN.	
Construction Permit Application	
To the City Council of the City of Vergas in the County of Otter Tail, State of Minnesota:	
Application is hereby made by the undersigned for a Construction Permit as provided by City	
Ordinance as adopted by the City of Vergas.	
 GOPHER STATE ONE CALL MUST BE NOTIFIED 48 HOURS PRIOR TO ANY DIGGING, CALL 1-800-252-1166 AS REQUIRED BY MINNESOTA STATE LAW. 	
• THE CITY OF VERGAS WILL CHECK ALL SETBACKS ON ANY NEW	
CONSTRUCTION IT IS THE ADDITIONAL DESIGNATION OF THE PROPERTY	
CONSTRUCTION. IT IS THE APPLICANT'S RESPONSIBILITY TO HAVE ALL	
PROPERY LINES LOCATED. ALL NEW CONSTRUCTION REQUIRES THE	
APPLICANT TO MARK THE PROPOSED BUILDING SITE AND PROPERTY	
LINES BEFORE THE CONSTRUCTION PERMIT WILL BE APPROVED. • All Electrical work MUST have an electrical permit. That must be obtained separately from	
a MN State Contract Electrical Inspector (218)342-3345 or (218)849-6059.	
Property Description: (NEW CONSTRUCTION ONLY)	
Lot Block , Addition , Addition	
Property: Width 2 feet, Length 1220 feet	
Must supply City with a \$1,000 deposit for tar break up. City will reimburse \$1,000 when project	
complete and street is approved by Utilities Superintendent.	
PLEASE NOTE: WITH ANY NEWLY CONSTRUCTED HOME, THERE ARE FEES FOR START UP OF	
UTILITIES. WATER HOOK-UP ASSESSMENT IS \$750.00, SEWER IS \$750.00.	
Name of Applicant: HOVON Tolky	
The strappion of the strain of	
Address of Construction Project:	
Mailing Address: 411 W bake 5 Phone: 101313-1134	
1. Permit to (CIRCLE ONE)	
Build Install Addition Alter	
Move Demolish Repair Remodel	
Description of work to be done:	
asses Inc Side usin Pelo Colombia	
2. Proposed use of building: (CIRCLE ONE) Residential Commercial	
100	
3. VALUATION (not just your cost) of work being completed: \$ \$ \(\)	· /
Building Contractor: Acron Johnson 1	54
concrete	
Building Contractor: A avon Johnson 701-373-1/8 Name: Saje(Son License Number: Phone: 25 39-246	1
The state of the s	7/
Plumber: (must have MN License)	
Name: License Number: Phone:	
Phone:	
Electrician:	
Nama	
Name: License Number: Phone: Phone: Form approved by City of Vergas Council 09/12/2017	
Updated 5/10/2022	

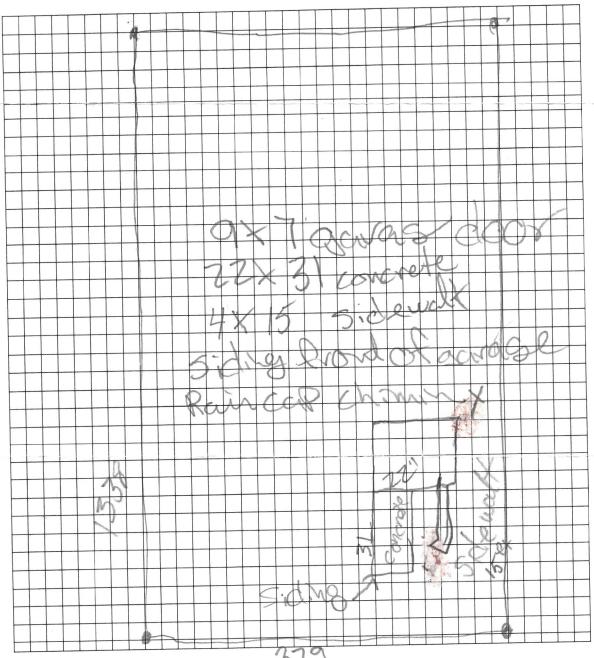
4.	Attached a "Site Plan," showing the proposed location of any new construction in reference to the property including existing buildings. If you have a copy of a professionally prepared site plan, attach a copy for review by the City's Site/Zoning Inspector. Blueprint or Design Drawings must be submitted 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 SIGNATURE: Permit expires in one year if project is not complete, please reapply for permit.
ÿ	CONSTRUCTION APPLICATION SITE PLAN DESIGN Provided on separate sheet must include the following.
1.	Identify and describe the work to be covered by the permit for which application is being made
	A. Sketch of the proposed project including current and proposed structures.B. Note the lot size and dimensions and locations of proposed project.
Please	reby say that the facts stated by me in the site application are true to the best of my knowledge and belief. be aware that no construction shall begin until the Zoning official has approved the plans and revisions the n if necessary and has indicated approval to begin.
Signa	ture of Applicant Date Zoning Official Date

\$	Water Hook-up \$Sewer Hook-up
\$	Permit Fee s Tar Break Up Deposit to WORK before 120 Total Fees & 60 Double due to WORK before
R	eceipt # 153247 Date Paid 10/19 ,2023
S	ignature: Date: 10/19, 202 3 (Permitting Authority) Pate Approved by Planning Commission or Clerk-Treasurer: 10/19, 202 3
Ι	Pate Approved by Planning Commission or Clerk-Treasurer: 10/19, 2023
	Form approved by City of Vergas Council 09/12/2017

CONSTRUCTION APPLICATION SITE PLAN DESIGN

Please identify and describe the work to be covered by the permit for which application is being made on the line provided below:

 Please sketch the proposed project on the graph below. Describe the land on which the Proposed work is to be done (note the lot size and dimensions and locations of proposed project).



I do hereby say that the facts stated by me in the above site application are true to the best of my knowledge and belief. Please be aware that no construction shall begin until the Zoning official has approved the plans and revisions the site plan if necessary and has indicated approval to begin.

Signature of Applicant

Date

Zoning Official

Date

Form approved by City of Vergas Council 09/12/2017