

Applicant to complete shaded areas including signature.

SITE ADDRESS _____	DATE _____
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LEGAL DESCRIPTION	Lot: _____	Block: _____
	Addition: _____	Property I.D.# _____

OWNER	Name / Address / City / State / Zip / Daytime Telephone _____
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TYPE OF WORK <input type="checkbox"/> Commercial <input type="checkbox"/> Residential	<input type="checkbox"/> New Construction <input type="checkbox"/> Finish Basement <input type="checkbox"/> Remodel <input type="checkbox"/> Addition <input type="checkbox"/> Garage - Attached <input type="checkbox"/> Garage - Detached	<input type="checkbox"/> Deck <input type="checkbox"/> Accessory Structure <input type="checkbox"/> Pool <input type="checkbox"/> Re-Roof <input type="checkbox"/> Re-Side <input type="checkbox"/> Window Replacement	<input type="checkbox"/> Demolition <input type="checkbox"/> Fence <input type="checkbox"/> Shed <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Misc Other _____
ESTIMATED VALUE OF WORK TO BE PERFORMED			

SPECIAL CONDITIONS OF PERMIT: _____

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative is required and authorizes the City of Silver Lake Zoning Administrator or designee and the City of Silver Lake Building Official or designee to enter upon the property to perform needed inspections. Entry may be without prior notice.

I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions, and to abide by all of the ordinances of the City and the Laws of the State of Minnesota regarding actions taken pursuant to this permit. I agree to pay all plan review fees even if I choose not to proceed with the work.

Permit expires when building and work is not commenced within 180 days from date of Permit issued, or if building and work suspended, abandoned or not inspected for 180 days.

SIGNATURE OF APPLICANT: _____	DATE: _____
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BUILDER INFORMATION

BUILDER _____	Name / Address / City / State / Zip / Daytime Telephone _____	Contractors License No. _____
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ARCHITECT _____	Name / Address / City / State / Zip / Daytime Telephone _____
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<i>Office Use Only:</i>		SETBACKS	PERMIT VALUATION:	
ACTUAL:	Front _____	Rear _____	Side _____	Side _____
REQUIRED:	Front _____	Rear _____	Side _____	Side _____
OCCUPANCY TYPE: _____			TYPE OF CONSTRUCTION: _____	
CODE USED: IRC IBC OTHER: _____			SPRINKLED BUILDING: YES / NO	

		CITY FEES	
Permit Fee: \$ _____ Plan Check Fee: \$ _____ State Surcharge: \$ _____ Other: \$ _____ SUB-TOTAL \$ _____	Park Ded: \$ _____ SAC Charge: \$ _____ WAC Charge: \$ _____ Sewer Hook-Up: \$ _____ Water Hook-Up: \$ _____ Water Meter: \$ _____ Sewer Trunk: \$ _____ Water Trunk: \$ _____ City Fee: \$ _____ Other: \$ _____		
Plumbing Fee \$ _____ Mechanical Fee \$ _____			

Paid _____	Receipt No. _____	TOTAL DUE: \$ _____
Date _____	By _____	

BUILDING OFFICIAL APPROVAL BY: _____	DATE: _____
ADMINISTRATOR/CLERK/PLANNER _____	DATE: _____
ZONING ADMINISTRATOR: _____	DATE: _____

CITY OF SILVER LAKE

BUILDING PERMIT APPLICANT: PROPERTY OWNER

I understand that the State of Minnesota requires 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 document, I attest to the fact that I am building or improving this house myself. I hereby claim to be exempt from the state licensing requirements because I am not in the business of building on speculation or for resale and that the house for which I am applying for this permit, located at _____, is the first residential structure I have built or improved for the past 24 months. I also 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 Minn Stat. 514.01.

Furthermore, I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this house and I understand 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 Minn. Stat. 326.92, subd. 1, and that I would forfeit my rights to reimbursement from the Contractor's Recovery Fund in the event any contractors I hire are unlicensed.

I also acknowledge that as the contractor on this project and applicant of this permit, I am solely and personally responsible for any violations of the state building code and/or city ordinance in connection with the work performed on this property.

Signature of Property Owner

Property Owner – Print Name

Date

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

The purpose of this optional form is to have the "home-owner" acknowledge their responsibility of code and statute issues in the building of their home when they are acting as a general contractor.

City of Silver Lake

*308 Main Street West
Silver Lake, MN 55381
www.cityofsilverlake.org*

April 10, 2006

To: New Construction Building Permit Applicants

From: Clerk's Office

Re: Erosion Control Plan

Effective May 1, 2006 an Erosion Control Plan must be submitted and approved prior to the issuance of a building permit for new construction. Any questions feel free to contact us at (320) 327-2412.