CITY OF CHAMPLIN

11955 CHAMPLIN DRIVE, CHAMPLIN, MN 55316 * (763) 421-2629 OFFICE
(763) 421-5256 FAX * WWW.CI.CHAMPLIN.MN.US

BUILDING PERMIT APPLICATION

ADDRESS:		DATE:
OWNER:		PHONE:
LOT:	BLOCK:	ADDITION:
CONTRACTOR:	LICENSE #:	PHONE:
ARCHITECT:	ADDRESS:	PHONE:
OCCUPANCY CLASS:	ST BLDG VALUE:	SIZE OF STRUCTURE:
TYPE OF CONSTRUCTION:	TYPE OF WORK:	

FLOOR AREA: (For Office Use Only)

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

PERMIT FEE:	
PLAN CK:	
SUR CHG:	
TOTAL:	

SPECIAL INSTRUCTIONS:

ALL SETBACKS MEASURED FROM PROPERTY LINE.

PUBLIC SEWER: _____ WATER: _____

SAC CONNECTION CHARGES: _____

TS&S CONNECTION CHARGES: _____

WATER METER SIZE & FEE: _____

ACKNOWLEDGEMENT AND SIGNATURE: The undersigned hereby represents upon all of the penalties of law, for the purpose of inducing the City of Champlin to take the action herein requested, that all statements herein are true and that all work herein mentioned will be done in accordance with the ordinances of the City of Champlin, the State of Minnesota, and rulings of the Champlin Building Department.

_____
SIGNATURE OF APPLICANT
Pursuant to the Data Privacy Act information provided is public.

_____
SIGNATURE OF BUILDING OFFICIAL