



BUILDING PERMIT APPLICATION

11955 Champlin Drive / Champlin, MN 55316 / Phone: 763-421-2629 / Fax: 763-421-5256 / www.ci.champlin.mn.us

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

FLOOR AREA: (For Office Use Only)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

PERMIT FEE:	_____
PLAN CHECK:	_____
SURCHARGE:	_____
TOTAL:	_____

SPECIAL INSTRUCTIONS:

ALL SETBACKS MEASURED FROM PROPERTY LINE.

PUBLIC SEWER: _____ WATER: _____

SAC CONNECTION CHARGES: _____

TS&S CONNECTION CHARGES: _____

WATER METER SIZE & FEE: _____

I hereby apply for an building permit and acknowledge that the information above is complete and accurate; that the work will be done in conformance with the ordinances of the City of Champlin and State Building Codes; that I understand this is not a permit but only an application for a permit and the work is not to start without a permit: that the permit work will be done in accordance with approved plans, specifications and codes.

Signature: APPLICANT
 Pursuant to the Data Privacy Act information provided is public.

Signature: BUILDING OFFICAL