

ZONING PERMIT APPLICATION*

OFFICE OF BUILDING AND HOUSING HIBBING CITY HALL
Telephone (218) 262-3486

(please print or type)

OWNER _____ ADDRESS OF PROPERTY _____ ZIP _____ ZONING DISTRICT _____
(Applicant shall be responsible to provide full legal description and parcel code. Use tax statement when appropriate)

LEGAL DESCRIPTION _____ (See Attachment)

MAILING ADDRESS _____ ZIP _____ PHONE _____

NAME AND ADDRESS OF CONTRACTOR _____ LICENSE NUMBER _____ ZIP _____ PHONE _____

NAME AND ADD. OF ARCHITECT OR DESIGNER _____ ZIP _____ PHONE _____

PROJECT DESCRIPTION (Generally describe the proposed construction and include building dimensions for new construction or additions)

CLASSIFICATION OF USE

Residential # Dwelling Units Manufactured Home Commercial Industrial Agricultural
 Garage Warehouse Storage Other (specify) **TYPE OF IMPROVEMENT** New

BASE COST (omit cents) \$ _____

To be installed but not included in the above cost

a. Electrical \$ _____

b. Plumbing \$ _____

c. Heating, air conditioning \$ _____

d. Other (elevator, etc.) \$ _____

PROJECT VALUATION (Total Cost: Materials & Labor) \$ _____

SBC PROJECT VALUATION (Bldg. Official's) \$ _____

APPLICABLE FEES - OFFICE USE ONLY

Mechanical Permit	\$ _____	Date _____ Initials _____ <input type="checkbox"/> Paid
Plan Check Fee (Plan Review)	_____	
State Surcharge	_____	
Zoning Permit	_____	
Demolition Permit	_____	
Sign Permit	_____	
Moving Permit	_____	
TOTAL	\$ _____	

NOTICE FOR THE APPLICANT:

APPLICANT MUST PROVIDE COMPLETE CONSTRUCTION PLANS FOR ALL BUILDING PERMIT APPLICATIONS. APPLICANT MUST PROVIDE SITE PLAN TO SCALE - WITH DIMENSIONS, SETBACKS OF ALL EXISTING AND PROPOSED STRUCTURES ON LOT. SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, AND THE USE OF PUBLIC PROPERTY SUCH AS STREETS, SIDEWALKS, ALLEYS, ETC. INCOMPLETE APPLICATIONS MAY BE REJECTED.

APPROVED BUILDING/ZONING PERMITS BECOME NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE OF APPLICANT _____ DATE _____

Use pen only - press hard for carbon copies

* This form may also be used for zoning permit, demolition permit, moving permit and/or sign permit applications under the authorization of the Building Official or Zoning Administrator.

PERMIT NUMBER: # _____ PARCEL CODE: _____

NAME _____ ADDRESS OF PROPERTY _____

-INSTRUCTIONS-

SITE PLAN DRAWN TO SCALE - SHOW DIMENSIONS OF LOT AND ALL EXISTING AND PROPOSED STRUCTURES. SHOW DISTANCES FROM FRONT, SIDE AND REAR PROPERTY LINES TO ALL EXISTING AND PROPOSED STRUCTURES. SHOW ALLEY AND LIST STREET NAMES ABUTTING LOT. SITE PLANS DRAWN BY FREE-HAND WILL NOT BE ACCEPTABLE.

IT IS THE OWNER'S AND/OR APPLICANT'S RESPONSIBILITY TO KNOW THE SUBJECT PROPERTY LINES IN ORDER TO FILE FOR THIS PERMIT.



PLACE AN ARROW IN THE CIRCLE TO INDICATE THE DIRECTION OF NORTH

GRAPH SQUARES ARE 5'X5' OR 1"=20', OTHERWISE NOTE SCALE AS FOLLOWS:

I/we as applicant certify that the proposed construction will conform to the dimensions and uses shown above, and that no changes will be made without first obtaining approval.

Applicant's Signature _____ Date _____

Plan Review by _____

OFFICE USE ONLY: This Is An Application For:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Building Permit	Zoning Permit	Moving Permit	Demolition Permit
		<input type="checkbox"/>		
		Sign Permit		
Official's Comments: _____				