

# City of Osakis

14 Nokomis Street East ~ PO Box 486 ~ Osakis, MN 56360  
Ph: (320) 859-2150 ~ FAX: (320) 859-3978

## New Dwelling for R-2 District Building Permit Application

For Office Use Only	
Permit No.	_____
PID No.	_____
DATE RCVD.	_____
Permit Fee	_____
Surcharge	_____
Plan Check	_____
TOTAL FEE	\$ _____

*Please Type or Print Legibly:*

1. Site Address \_\_\_\_\_
2. Owner(s) \_\_\_\_\_ Daytime Phone \_\_\_\_\_
3. Owner's Address (if different from above) \_\_\_\_\_
4. Legal Description of Site: *(Please Attach Metes & Bounds Description on Separate Sheet)*  
*Note\* If unknown, please refer to property tax statement or ask Zoning Administrator*  
Lot(s) \_\_\_\_\_ Block \_\_\_\_\_ Addition \_\_\_\_\_
5. Principle Structure:  
Triplex: \_\_\_\_\_ Quadraplex: \_\_\_\_\_ Multiple Family Unit: \_\_\_\_\_ Condominium & Cooperative Unit: \_\_\_\_\_
6. Dimensions of Uses in Sq. Ft.:  
Dwelling (1st Story) \_\_\_\_\_ Dwelling (Additional Stories) \_\_\_\_\_  
Basements \_\_\_\_\_ Finished? ( yes or no ) Garages \_\_\_\_\_ Attached? ( yes or no )  
Decks \_\_\_\_\_ *(If deck is planned it must be shown on plans and completed w/in 1 year)*
8. Type of Siding \_\_\_\_\_
9. Estimated Cost of Project *(Including Materials & Labor)*: \$ \_\_\_\_\_
10. Approximate Start Date \_\_\_\_\_
11. Please provide general contractor's name and license number as required by Minnesota Statute  
Name \_\_\_\_\_ License No. \_\_\_\_\_

**OR:** *This work is being done by applicant who is acting as their own general contractor and assumes complete responsibility.*

**I have read and signed the Licensed Contractor Disclaimer.** \_\_\_\_\_ *(Initial Here)*

**Additional Information Required on Reverse**

12. Please Provide the Following:

General Contractor: \_\_\_\_\_ PH: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ PH: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ PH: \_\_\_\_\_

Mason & Concrete Contractor: \_\_\_\_\_ PH: \_\_\_\_\_

Heating & Venting Contractor: \_\_\_\_\_ PH: \_\_\_\_\_

Excavation Contractor: \_\_\_\_\_ PH: \_\_\_\_\_

13. Is a Sprinkler System Planned? ( yes or no)

**The following information must be completed and submitted to City Hall.**  
**Your application will be deferred until all items are provided.**

\_\_\_\_\_ EROSION CONTROL AGREEMENT.

\_\_\_\_\_ SITE PLAN (*drawn to scale*) WITH ALL LOT AREA AND SETBACK REQUIREMENTS MET

\_\_\_\_\_ THE LOT AND BUILDING STAKED OUT ON THE PROPERTY.

\_\_\_\_\_ ONE FULL SIZE SET OF CONSTRUCTION PLANS WITH CROSS SECTIONS.

\_\_\_\_\_ ONE 8 1/2 x 11 SIZE SET OF CONSTRUCTION PLANS.

\_\_\_\_\_ ENERGY CALCULATIONS.

\_\_\_\_\_ SIGNED PROPERTY DISCLAIMER.

\_\_\_\_\_ LICENSED CONTRACTOR DISCLAIMER. (*If owner is acting as the General Contractor*)

\_\_\_\_\_ SHORELINE MANAGEMENT ORDINANCE. (*Within 1000 ft from any public waters*)

\_\_\_\_\_ APPLICATION FOR WATER CONNECTION.

\_\_\_\_\_ APPLICATION FOR SEWER CONNECTION.

\_\_\_\_\_ NO LOT SHALL HAVE MORE THAN 30% IMPERVIOUS SURFACE COVERAGE.

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. I have identified all property boundaries, easements, flood zones and/or wetlands existing on the property on my survey and application. The undersigned further agrees the City and its' administrative staff relied on the accurateness of this application, plans and specifications relative to this project and holds the city of Osakis, and its employees harmless from all liability arising from the granting of this permit.

\_\_\_\_\_  
**AUTHORIZED SIGNATURE OF OWNER OR BUILDER**

\_\_\_\_\_  
**ZONING ADMINISTRATOR**

*This Permit Expires One Year From:* \_\_\_\_\_

\_\_\_\_\_  
**BUILDING INSPECTOR**