



CITY OF DELANO

Department of Building Inspections
 234 2nd Street North, PO Box 108
 Delano, MN 55328
 Phone: 763 972-0550 -- Fax: 763 972-6174

BUILDING PERMIT APPLICATION

Permit Number: _____
 Date Issued: _____
 Receipt Number: _____

GOVERNMENT DATA PRACTICES ACT – TENNISON WARNING:

The data you supply on this form will be used to process the permit you are applying for. You are not legally required to provide the data, but we will not be able to process the permit without it. The data will constitute a public record if and when the permit is granted.

Site Location: _____ Date: _____
 Applicant Name: _____ License No. _____
 Address: _____ *Lead Cert. No. _____
 Architect/Engineer: _____ Phone No. _____
 Address: _____ Registration No. _____

Permit Type: Residential Commercial
 New *Addition/Alteration Tennant Improvement

Description of Work: _____

*Is the home pre-1978? Yes No

*Does the project require lead remediation? Yes No If no, complete lead supplement form.

Construction Code: IBC IRC Valuation of Work: \$ _____

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

Print Name: _____ Signature: _____

OFFICE USE:

Valuation	\$ _____	Site	<input type="checkbox"/>	Const. Type	_____
Permit Fee	\$ _____	Footing/Fdn	<input type="checkbox"/>	Occupancy	_____
Plan Review	\$ _____	As – Built	<input type="checkbox"/>	Sprinklers	_____
City Lead Surcharge	\$ _____	Framing	<input type="checkbox"/>	Zoning Dist.	_____
State Surcharge	\$ _____	Insulation	<input type="checkbox"/>	Approvals:	
_____ SAC	\$ _____	Wallboard	<input type="checkbox"/>	Planning:	_____
Connection	\$ _____	Reroof/Photos	<input type="checkbox"/>	Engineering:	_____
Grad Comp.	\$ _____	Reside/Photos	<input type="checkbox"/>	Public Works	_____
R-of-W	\$ _____	Stucco	<input type="checkbox"/>	Fire	_____
Silt Fence	\$ _____	Cultured Stone	<input type="checkbox"/>	DMU	_____
Other	\$ _____	Other: _____	<input type="checkbox"/>	Bonds	_____
TOTAL	\$ _____	Final	<input type="checkbox"/>		

Permit Approved By: _____ Date Approved: _____