

Glyndon, MN 56547
 Phone (218) 498-2578 or Fax (218) 498-2579

COMMERCIAL BUILDING PERMIT & PLAN REVIEW APPLICATION CHECK LIST

APPLICANT IS: Owner ___ Designer ___ Contractor ___ Other ___		
SITE	Project Title	
	Project Site Address	
OWNER	Owner	Contact Person
	Owner Address	Phone Number
	City, State, Zip	Fax Number
CONTRACTOR	Contractor	Contact Person
	Contractor Address	Phone Number
	City, State, Zip	Fax Number License Number
DESIGN FIRM	Designer	Contact Person
	Firm Address	Phone Number
	City, State, Zip	Fax Number License Number
	Structural Engineer (If Applicable)	Mechanical Engineer (If Applicable)
P R O J E C T	Class of Work: New ___ Addition ___ Alteration ___ Other ___	
	Anticipated Start Date: _____	Total Construction Valuation: _____
	Type of Construction: _____	Occupancy: _____ Square Footage: _____
	Subcontractors: Plumbing _____	Mechanical Engineer _____
	(If Applicable) Electrical _____	Concrete _____
	Description of Work:	
<p>I hereby apply for a Building Permit and acknowledge that the information above is complete and accurate; that this is not a permit; that the work will be performed in accordance with the conditions of the permit, the approved plans and specifications, and the Minnesota State Building Code; and, that I will cause the work to remain accessible and exposed for inspection purposes.</p>		
Applicant Signature		Date

One *complete* set of blue prints required.
 The City of Glyndon requires four weeks for plan review.
 Applicant will be notified of review completion.
 Permit fees are based on construction valuation.
 Plan review fee is 25% of permit fee.