

# Residential Building Permit Application



## Property Owner Information

## Contractor Information

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Project Site Address: \_\_\_\_\_

License Number: \_\_\_\_\_

**Class of Work:**     NEW     ADDITION     ALTERATION     OTHER

Anticipated Start Date: \_\_\_\_\_

**Sub Contractors:** Plumbing \_\_\_\_\_

Total Project Valuation: \_\_\_\_\_

(If applicable) Mechanical \_\_\_\_\_

Square Footage: \_\_\_\_\_

Electrical \_\_\_\_\_

**Description of Work** (For residential garages, additions, decks, and porches, please draw a site plan including setbacks from property lines, on the back of this permit application):

**Type of Structure:**     Rambler     Twin Home     2 Story  
    Bi-Level     Split Lvl

Parcel Number: \_\_\_\_\_

Legal Description: \_\_\_\_\_

### **\*\*NEW CONSTRUCTION\*\* Must Also Include:**

- (1) Set of Blueprints with wall section/cross section.
- (1) Set of Floor Truss and Roof Truss LAYOUT ONLY.

**Type of Balanced Mechanical Ventilation System:** \_\_\_\_\_

**TOTAL VENTILATION RATE:** \_\_\_\_\_

~The City of Glyndon requires 24 hours for review. Applicant will be notified upon review completion.~

Applicant signature:

Date: