

WEST LAKELAND TOWNSHIP

15199 8th Street North, Stillwater, Minnesota 55082

Duane Stensland, Building Inspector

Phone 651-436-7669 Fax: 651-436-7289

BUILDING PERMIT APPLICATION

DATE

SITE ADDRESS:

OWNER	
Owners Name	
Street Address	
City	
State Zip	
Phone	
Use of Building	

CONTRACTOR	
Company Name	
Applicants Name	
Address	
City	
State Zip	
Phone	
State License Number	

CERTIFICATION

Separate permits are required for electrical and septic. This permit becomes 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 anytime after work is commenced. I hereby certify that I have read and examined this application and now 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 give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

* NOTE—MONIES RECEIVED FOR PERMIT/ESCROWS WILL BE DEPOSITED UPON RECEIPT & RETURNED UPON SATISFACTORY COMPLETION OF WORK APPROVED BY THE BUILDING INSPECTOR AND/OR TOWNSHIP BOARD.

Applicant's Signature

Date

Inspector Signature

Date

Class of Work		
New	Addition	Alter
Remove	Move	Repair
Brief Description of Work:		
Valuation of Work:		

New Construction Only *Complete Below*

LEGAL DESCRIPTION(New Construction)	
Parcel I.D. No.	
Lot No.	Block
Tract	

BUILDING INFORMATION	
Type of Construction	Occupancy Group/Division
No. of Stories	Max. Occupancy Load

SQUARE FOOTAGE CALCULATIONS:

1st floor: _____
 2nd floor: _____
 Basement: Finished: _____
 Unfinished: _____

Garage: _____
 Additional Stories: _____

Fire Sprinkler Required: _____ Yes _____ No

FOR OFFICE USE ONLY	
Plan Review	_____ Yes _____ No