

# Building Permit Application



## Planning & Zoning Department

DUE TO COVID-19: All building permit applications should be sent by email to [permits@medinamn.gov](mailto:permits@medinamn.gov). Further instructions on how the permit process will be handled will be communicated through email. We are now accepting credit cards payments by phone (fee applies).

Site Address: \_\_\_\_\_  
Owner Name \_\_\_\_\_  
Telephone #: \_\_\_\_\_  
Lot/Block/Sub or PID: \_\_\_\_\_

Date: \_\_\_\_\_

## Contractor Information

Firm: \_\_\_\_\_

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

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

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

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

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

License #: \_\_\_\_\_

USE: \_\_\_\_\_

Construction Type: \_\_\_\_\_

## Type of Work:

- |   |  |
|---|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Mechanical      |
| <input type="checkbox"/> Addition         | <input type="checkbox"/> Fireplace       |
| <input type="checkbox"/> Deck             | <input type="checkbox"/> Plumbing        |
| <input type="checkbox"/> Finish/Remodel   | <input type="checkbox"/> Re-roof/Re-side |
| <input type="checkbox"/> Septic System    | <input type="checkbox"/> Sign Permit     |
| <input type="checkbox"/> Grading Permit   | <input type="checkbox"/> Other           |

## Description:

Valuation of Work: \_\_\_\_\_

### Structure Size

Length \_\_\_\_\_ Width \_\_\_\_\_

Sq. Ft. \_\_\_\_\_ Height \_\_\_\_\_

### Acknowledgement and Signature:

The undersigned hereby requests permission to make the real improvements specified, and declares under penalty of law acknowledgement and acceptance of all information, conditions, and requirements represented on this document. The undersigned affirms to the accuracy of all information submitted along with the application and acknowledges responsibility to pay for plan review costs associated with this application regardless of if the permit is issued.

The undersigned recognizes that this document is merely an application and that no work may be completed until plans have been approved, all permit fees are paid, and the permit has been issued. After the permit has been issued, the undersigned agrees to do all work in strict compliance with all City of Medina ordinances and State of Minnesota building code requirements. The undersigned further agrees to carry out inspections necessary for this permit.

Signature: \_\_\_\_\_

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

When permit is ready

- Call  
*Circle: Contractor OR Owner*  
 Email \_\_\_\_\_

### Office Use Only

Received Date \_\_\_\_\_

Engineering: \_\_\_\_\_ Zoning: \_\_\_\_\_

Adjusted Valuation: \_\_\_\_\_

# Mech \_\_\_\_\_ # Plumbing \_\_\_\_\_

# Fireplace \_\_\_\_\_ Code Analysis \_\_\_\_\_

Fire Suppression: \_\_\_\_ yes \_\_\_\_ no

Meter Size: \_\_\_\_\_

Site Visit Fee: \_\_\_\_\_

Other Fee(s): \_\_\_\_\_

Building Official Approval: \_\_\_\_\_