

APPLICATION/BUILDING PERMIT  
FOR CONSTRUCTION  
MEEKER COUNTY

City of Dassel

RETURN ALL FORMS TO: City of Dassel  
460 3rd St/PO Box 391  
Dassel, MN 55325  
320-275-2454

OFFICE USE ONLY

Building Permit No. \_\_\_\_\_

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

Date Paid \_\_\_\_\_

(Please Print)

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

Property Owner's Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Was structure built before 1978? Yes No

Property Owner's Email: \_\_\_\_\_

Contractor: \_\_\_\_\_

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

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

Contractor's Email: \_\_\_\_\_

Lead Certification License #: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Electrician: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Excavation Contractor: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Note: Excavation contractor must call **GOPHER STATE ONE - CALL 1-800-252-1166** at least 48 hours before beginning any excavation. (MN Statute CH216D)

Description of Proposed Construction: \_\_\_\_\_

\*\*\*SITE PLAN GRID DISPLAYING SETBACKS IS REQUIRED\*\*\*  
NEW HOMES GRADING PLAN MUST SHOW ELEVATIONS AND CONTOURS

Applicant's estimated cost of construction (including material & labor) \$ \_\_\_\_\_

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Construction Value in Accordance  
with State Valuation Tables:

\$ \_\_\_\_\_

Building Permit \$35.85

Plan Review \$23.81

State Surcharge \$0.75

Administration \$3.59

TOTAL FEE DUE \$64.00

Zoning District \_\_\_\_\_

Parcel No. \_\_\_\_\_

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

\_\_\_\_\_

Front Setback: \_\_\_\_\_

Rear Setback: \_\_\_\_\_

Side Setback: \_\_\_\_\_

Side Setback: \_\_\_\_\_

Lot Coverage: \_\_\_\_\_

Building Height: \_\_\_\_\_

Zoning Approval Signature:

\_\_\_\_\_

APPLICANT'S CERTIFICATION AND COMPLIANCE:

I hereby certify that I have completed, read and examined this application and know the same to be true and correct. I accept responsibility for compliance with all applicable laws and county provisions, including those noted on the county zoning review, survey, plan review notes, and representation or lack of representation of setbacks, easements and property lines. Issuance of this permit does not authorize violation or cancellation of any state or local law regulating construction or the performance of construction.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

APPROVAL BY BUILDING OFFICIAL:

Occupancy Group: \_\_\_\_\_ Type of Construction: \_\_\_\_\_

Comments or Conditions: \_\_\_\_\_

\_\_\_\_\_

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

## Property Owner Waiver

Permit Number -

### Minnesota State Contractor Licensing Requirements

*The purpose of this form is to have property owners acknowledge their responsibilities with respect to the Minnesota State Building Code, state licensing requirements, municipal zoning ordinances, and to other applicable rules and regulations when they are acting as general contractor in building projects.*

I understand that the State of Minnesota requires that all residential building contractors, remodelers, roofers, and owners improving residential real estate for purposes of speculation obtain a state license unless they qualify for a specific exemption from the licensing requirements. By signing this waiver, I attest to the fact that I am building or improving my property by myself. I claim to be exempt from the state licensing requirements because I am not in the business of building or improving homes for speculation, and this is the first residential structure that I have built or improved in the past 24 months.

I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this property. Some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting, remodeling, and/or roofing activity is a misdemeanor under Minnesota State Statute 326.92, subdivision 1, and that I forfeit my rights to reimbursement from the Contractor Recovery Fund in the event that any contractors that I hire are unlicensed.

I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the State Building Code and/ or jurisdictional ordinance in connection with the work performed on this property.

\_\_\_\_\_  
Signature or Property Owner

\_\_\_\_\_  
Project Address

\_\_\_\_\_  
Date

**Please return this signed waiver with the Building Permit Application**

To determine whether a particular contractor is required to be licensed check on the licensing status of an individual contractor or call the Minnesota Department of Labor and Industry, Licensing Division at 651-284-5069, or toll-free at 1-800342-5354.