APPLICATION FOR BUILDING PERMIT

ROYALTON TOWNSHIP
6052 ROYALTON RD • BRAHAM, MN • 55006
PHONE 320-396-2982 • EMAIL ROYALTON@ROYALTONTOWNSHIP.COM

CONTRACTOR'S LICENSE #: _____ DATE: _____ PERMIT #: _____

JOB SITE ADDRESS: _____

PID #:_____

APPLICANT: (CIRCLE ONE) OWNER CONTRACTOR AUTHORIZED AGENT

OWNER: _____PHONE: _____
ADDRESS: _____ CITY: _____ ZIP: _____

CONTRACTOR: _____ PHONE: _____
ADDRESS: _____ CITY: _____ ZIP: _____

NAME & PHONE: PLUMBING CONTRACTOR: _____
HEATING CONTRACTOR: _____
ARCHITECT: _____

TYPE OF CONSTRUCTION: (CIRCLE ALL THAT APPLY)
NEW ADDITION ALTER/REMODEL REPAIR DEMO MOVE OTHER

USE OF THE BUILDING: _____
DESCRIPTION OF WORK: _____
_____

CONTACT E.C.E. FOR ELECTRIC SERVICE:

TOWNSHIP TO DETERMINE IF SILT FENCE IS NEEDED ON SITE _____

VALUATION OF CONSTRUCTION: $_____ ESTIMATED COMPLETION DATE: _____

I HEREBY CERIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE. THE WORK WILL BE IN CONFORMANCE WITH THE ORDINANCES AND CODES OF ROYALTON TOWNSHIP, THE STATE OF MINNESOTA AND THE RULINGS OF THE BUILDING DEPARTMENT.

APPLICANT'S SIGNATURE: _____ DATE: _____

(PERMITS ARE VALID FOR ONE YEAR. ONE EXTENSION MAY BE GRANTED.)

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APPROVED BY: _____ VALUATION: _____
DATE: _____ PERMIT FEE: _____
COMMENTS: _____ PLAN CHECK: _____
_____ SURCHARGE: _____
_____ OTHER: _____
_____ _____
_____ _____
_____ _____
_____ _____

TOTAL PERMIT FEE: _____