

BUILDING PERMIT APPLICATION

Footing/Foundation # _____

Shell # _____

8080 Mitchell Road, Eden Prairie, MN 55344-2230
INSPECTIONS ONLY (952) 949-8341



DATE: _____ PERMIT # _____

DATA TO BE SUBMITTED WITH APPLICATION

COMMERCIAL

3 Sets of Structural/Architectural, Hvac, Plmb, Electrical
3 Sets of Survey & Landscaping Plans
Engineered Soils Report
Energy Computation

RESIDENTIAL/MISC BLDG

2 Sets of Building Plans
2 Legal Surveys (New)
2 Copies of Survey (Additions)
1 Energy Computation

TENANT FINISH/REMODEL

2 Sets of Plans

SITE ADDRESS	Suite # _____
LEGAL DESCRIPTION	Lot: _____ Block: _____ ADDITION: _____

APPLICANT: OWNER CONTRACTOR

Homeowner Name if (Residential) Or Tenant Name if (Commercial)	Homeowner or Tenant Name _____ Phone # _____ Address _____ City _____ State _____ Zip _____
Contractor	Company _____ OFFICE PHONE# _____ Contractor License # _____ Expiration Date: _____ Contact Person(Print) _____ Phone # _____ Address _____ City _____ State _____ Zip _____
Designer/Architect	Company _____ Phone # _____ Contact Person(Print) _____ Phone # _____ Address _____ City _____ State _____ Zip _____

BLDG PERMIT TYPE:	<input type="checkbox"/> SFD <input type="checkbox"/> Duplex <input type="checkbox"/> Condo <input type="checkbox"/> Public <input type="checkbox"/> SFD/Remodel <input type="checkbox"/> Apartment <input type="checkbox"/> Industrial/Office <input type="checkbox"/> Commercial <input type="checkbox"/> SFD/Addition <input type="checkbox"/> Townhome <input type="checkbox"/> Private <input type="checkbox"/> Other
WORK TYPE: (choose all that apply)	<input type="checkbox"/> New <input type="checkbox"/> Garage/Shed <input type="checkbox"/> Deck <input type="checkbox"/> Interior/Exterior Demo <input type="checkbox"/> Remodel/Alt. <input type="checkbox"/> Pool <input type="checkbox"/> Porch <input type="checkbox"/> Footing <input type="checkbox"/> Addition <input type="checkbox"/> Reside <input type="checkbox"/> Retaining Wall <input type="checkbox"/> Repair <input type="checkbox"/> Interior Finish <input type="checkbox"/> Reroof <input type="checkbox"/> Demo Bldg <input type="checkbox"/> Move Bldg <input type="checkbox"/> Solar Array System

Description of Work: _____

NOTE: SEPARATE PERMITS REQUIRED FOR ANY ELECTRICAL, MECHANICAL OR PLUMBING WORK
 "FAILURE TO OBTAIN REQUIRED PERMITS WILL RESULT IN A DOUBLE PERMIT FEE."

PERMIT AND PLAN REVIEW FEE ARE BASED ON TABLE 1A .

ESTIMATED VALUE OF WORK \$ _____ CITY'S ESTIMATED VALUE OF WORK \$ _____
 VALUE MUST INCLUDE MATERIALS & LABOR (Excluding Land)

STATE SUR-CHG (.0005 X VALUE OF JOB) or Minimum \$1.00

Circle which ones Apply Below

DESCRIPTION	SQUARE FOOTAGE
1 ST Floor	
2 nd Floor	
Square footage per floor above 2 nd Floor	
Basement Finished Unfinished	
TOTAL FINISHED SQUARE FOOTAGE	
Garage – Attached / Detached / Shed	
Swimming Pool – In Ground / Above Ground	
Deck / Stairway	
Porch – Front Entry / Screened / 3 Season / 4 Season / Gazebo / Pergola / Rear Entry	

Office Use Only	
Bldg Permit Fee	\$ _____
Plan Check Fee	\$ _____
State Sur-Charge	\$ _____
Investigation Fee	\$ _____
S.A.C. Fee (# of Units _____) _____	\$ _____
City Water (# of Units _____) _____	\$ _____
City Sewer (# of Units _____) _____	\$ _____
Park Dedication	\$ _____
Trunk Assessment Fees	\$ _____
TOTAL FEES:	\$ _____

LOWEST FLOOR ELEVATION: _____

Length _____ Width _____ Stories _____ # of Units _____

Occupancy Type _____ Construction Type _____ Zoning _____

PLEASE NOTE:

Projects in the Nine Mile Creek or the Riley-Purgatory-Bluff Creek Watershed Districts May Require a District Permit.

Please Contact the District for More Information at:
 Nine Mile Creek: 952-358-2276 or
 Riley-Purgatory-Bluff Creek: 952-607-6512

This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City Of Eden Prairie to take the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Eden Prairie and the State of Minnesota.

Date:

Applicants Signature:

Permit Approved By: _____ Date Approved: _____

***When you pay by check, the City of Eden Prairie will present the check for payment to your bank electronically. Your original check will be destroyed once processed and you will not receive your cancelled check back.**