Building & Land Use Permit

Wabasha County, Minnesota

Applicant Info

Name of Applicant _____

Business Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone _____

Email _____

Project Details:

Name of Landowner(s) _____

Project Address: _____

City _____ State _____ Zip Code _____

Phone: _____

Parcel ID: _____

Township/Section: _____

Is applicant property owner?

☐ Yes ☐ No

Structure Type:

- ☐ Home (# of bedrooms): _____
- ☐ Shed l Dimensions: _____
- ☐ Garage/Carport l Dimensions: _____
- ☐ Deck l Dimensions: _____
- ☐ Retaining Wall l Height _____
- ☐ Pool (In Ground)
- ☐ Solar (Commercial or Accessory)

Activity Type:

- ☐ New Construction
- ☐ Remodel/Repair
- ☐ Addition/Alteration

General Contractor: _____ License: _____ Phone: _____

Plumbing Contractor: _____ License: _____ Phone: _____

Mechanical Contractor: _____ License: _____ Phone: _____

*This permit becomes null and void if work or construction authorized is not commenced within 180 days, or work is suspended or abandoned for a period of 180 at any time after work has commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of law and ordinances governing this type of work will be complied with weather specified herein or not. The granting of a permit does not presume to give authority to violate of cancel the provisions of any other state of local law regulating construction or the performance of construction. I also agree to provide Wabasha County staff access to the property in order to inspect the project.

Refund Policy: Upon cancellation of building permits, refunds will be based on expenses from office time, inspections and zoning fees that were completed prior to cancellation notice.

SEPTIC COMPLIANCE INSPECTIONS ARE REQUIRED BEFORE PERMITS ARE REVIEWED IF IN SHORELAND ZONE OR EXPANDING THE LOAD ON A CURRENT SYSTEM.

Property owners are responsible for determining locations of property lines and public a private utility easements. This **MUST** be included on the site sketch.

_____ Signature of Applicant

_____ Print Name

_____ Date

***THIS APPLICATION MUST BE FILLED OUT IN ITS ENTIRETY OR IT MAY BE RETURNED AND DELAY PROCESSING