

# CITY OF STACY APPLICATION FOR BUILDING PERMIT

Property Owner's Name (s) \_\_\_\_\_

Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

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

Legal Description of Property \_\_\_\_\_

Plat \_\_\_\_\_

Zoning: R1 R2 R3 SL RM CBD GB LI I Existing Land Use \_\_\_\_\_

Occupancy Class \_\_\_\_\_

Set Backs:

Square Feet \_\_\_\_\_

\_\_\_\_\_ side yard \_\_\_\_\_

Length \_\_\_\_\_

\_\_\_\_\_ side yard \_\_\_\_\_

Width \_\_\_\_\_

front yard \_\_\_\_\_

House Design \_\_\_\_\_

rear yard \_\_\_\_\_

Description of Work (attach site plan):

**NOTICE:**

The applicant shall comply with all provisions of the State Building and Plumbing codes, as well as all City ordinances governing zoning and building. The State of Minnesota regulates all electrical work. The continued validity of this permit is contingent upon the applicant's compliance of all work done and materials used with the plans and specifications herewith submitted, and with the applicable ordinances of the City of Stacy.

I hereby acknowledge the above and agree to comply with the City of Stacy and the State of Minnesota's codes and ordinances.

\_\_\_\_\_  
Signature of Applicant  
(if agent, print principal's name & sign as agent)

For Office Use Only	
Permit # _____	Total Paid _____
Date Issued _____	Check # _____
Valuation _____	2 Sets of Plans Received _____
Plan Check Fee _____	Approved by the City of Stacy
State Fee _____	_____
Building Permit Fee _____	Approved by the Building Official
Administrative Fee _____	_____
WAC Fee _____	_____
SAC Fee _____	_____
S/W Inspection Fee _____	_____
Other _____	_____

Original to Applicant

Yellow to Building Official

Pink to City