



BUILDING PERMIT REQUEST FORM

City of Howard Lake, 625 8th Ave., PO Box 736, Howard Lake, MN 55349
Phone: 320 543 3670 | cityofhowardlake@howard-lake.mn.us | www.howard-lake.mn.us

Date:	
Site Address:	
PID:	

Building Permit Routed to Metro West	
Building Permit #	

Owner Information

Name:					
Address:					
City:		State:		Zip:	
Phone:					

Builder Information

Name:					
Address:					
City:		State:		Zip:	
Phone:					

Contractor's License #:	
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Contact Information

Name:			
Email:			
Phone:		Fax:	

Type of Work

☐ Commercial ☐ Residential

Est. Valuation of Work: Square Feet:

Detailed description of work to be performed:

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<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Drive / Curb & Gutter / Sidewalk
<input type="checkbox"/> Addition Commercial	<input type="checkbox"/> Retaining Wall Height <input type="text"/>
<input type="checkbox"/> Reroof Commercial	<input type="checkbox"/> Siding <input type="checkbox"/> HVAC
<input type="checkbox"/> Reroof Residential	<input type="checkbox"/> Demo <input type="checkbox"/> Signs
<input type="checkbox"/> New Construction	<input type="checkbox"/> Plumbing <input type="checkbox"/> Doors
<input type="checkbox"/> Fence-Height <input type="text"/>	<input type="checkbox"/> Finish Basement <input type="checkbox"/> Remodel
<input type="checkbox"/> Reside	<input type="checkbox"/> Garage/Shed <input type="checkbox"/> Deck
<input type="checkbox"/> Windows (must complete supplemental form)	
<input type="checkbox"/> Other <input type="text"/>	

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative, is required and authorizes the City Zoning Administrator or designee and the City Building Official or designee to enter upon the property to perform needed inspections. Entry may be without prior notice. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions and to abide by all ordinances of the City and the laws of the State of Minnesota regarding actions taken pursuant to this permit. **I agree to pay all plan review fees even if I choose not to proceed with the work.** Permit expires when work is not commenced within 180 days from date of permit, or if work is suspended, abandoned, or not inspected for 180 days. Work beyond the scope of this permit, or work without a permit or inspection will be subject to a penalty.

Applicant Signature: Date:

Printed Name: Signature is of: ☐ Owner ☐ Architect ☐ Lic. Bldg. Contr. ☐ Other:

Email: cityofhowardlake@howard-lake.mn.us

Office Use Only Below This Line

Occupancy Type:		Construction Type:		Code:		Building Sprinkled?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Valuation of Permit:							
Permit Fee:		SAC Charge:		Paid:			
Plan Review Fee:		Sewer Permit:		Date:			
State Surcharge:		Sewer Hook-Up:		Receipt:			
Site Inspection Fee:		Water Hook-Up:		By:			
Penalty/Other Fees:		Driveway Fee:					
Copy Charge (\$.25 per 8.5 x 11 page):		Water Meter Fee:					
Sub-Total		Water Permit:					
Plumbing Fee:		Storm Water Trunk:					
Mechanical Fee:		Building Approval By:		Date:			
Total Due:		City Approval By:		Date:			
		Special Approval By:		Date:			