

ZONING/CONSTRUCTION PERMIT APPLICATION

City of Pelican Rapids

Date Received:	Received by:		Account #	Permit #	
	APPLI	CANT INFORM	IATION		
Project Address:	Property Owner:		Phone:		
Mailing Address:		City:		State: Zip:	
General Contractor:	License		Phone:		
Proposed Use: Circle One					
This permit becomes null and void in a period of 180 days at any time afteorrect. All provisions of laws and of presume to give authority to violate. The issuance of this permit does not be a support of the per	f work or construction author er work has commenced. I have rdinances governing this typ or cancel the provisions of a	Other: (Please explain) ons: Typerized is not commenced within 180 ereby certify that I have read and e of work will be complied with whom y other state or local law regulations.	Asphalt Metal Other (please list) Signage: Type Dimension e of Construction: Odays, or if construction or lexamined this application lether specified herein or noting construction or the perfecting construction or the perfection.	ot. The granting of a permit does not	
such work is ready for inspection.		Pho	no:		
	me (please print): Phone: printure: Date:				
	(CITY USE ONL	Y		
PLANNING: Zoning District: R1 R2 R4 C I Approved by:					
Minimum Setbacks: Front	Side B	ack Road Right	of Way:	Other:	
Subject to the following cond	litions:				
PUBLIC WORKS: Approved by:			Date:		
Subject to the following cond	litions:				
FEES: Zoning Permit Fee:	e: Receipt #		e Issued:l	ssued:Issued by:	