

CITY OF APPLETON BUILDING PERMIT APPLICATION

City of Appleton – 323 West Schlieman Ave – Appleton MN 56208

Phone: (320) 289-1363 cityappleton@appletonmn.gov

Inspectron Inc.
Building Inspector, Justin Anderson

Contact: 320-905-5014

Applicant Information (all fields need to be completed)

janderson@inspectroninc.com

Property Owner Name		Property Owner Phone Number
Address of Project		Property ID/Parcel #
Contractor's Name	Address	Contractor's Phone Number
Contractor's License Number (Required)		Expiration Date
Contractor's Email Address		
Project Description		Completed Value (includes labor and materials)

Project Information

Permit Type	Project Proposed Use	Type of Construction (* requires Site Plan + Construction Plans)	
<input type="checkbox"/> Building <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Agricultural <input type="checkbox"/> Industrial <input type="checkbox"/> Townhouse <input type="checkbox"/> Public <input type="checkbox"/> Multi Family (+5)	<input type="checkbox"/> Accessory Building/Garage* <input type="checkbox"/> Addition* <input type="checkbox"/> Remodel* <input type="checkbox"/> Deck/Porch* <input type="checkbox"/> Foundation Only* <input type="checkbox"/> Siding <input type="checkbox"/> Roofing <input type="checkbox"/> Window/Door Replacement (same size) <input type="checkbox"/> Window/Door Replacement (change size)	<input type="checkbox"/> New Construction* <input type="checkbox"/> Furnace <input type="checkbox"/> Fireplace <input type="checkbox"/> Demolition <input type="checkbox"/> Manufactured Home* <input type="checkbox"/> Fence/Wall* <input type="checkbox"/> Aboveground Pool* <input type="checkbox"/> In Ground Pool* <input type="checkbox"/> Other

Notice: Separate permits are required for plumbing, heating, fireplace installation, electrical work, and installation of the septic system. The permit shall become null and void unless the work or construction authorized by the permit is commenced within 180 days after its issuance, or if the work authorized by the permit is suspended or abandoned for a period of 180 days after the time the work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provision of any other State or Local law regulating construction of the performance of construction. This building permit may be suspended or revoked if the permit has been issued in error or based on incorrect information supplied or in violation of any ordinance or regulation of the City of Appleton. All permit fees and other costs to review the application that are incurred by the City of Appleton for professional consultants will be paid prior to issuance of the Building Permit.

Signature (Contractor/Property Owner) _____ **Date** _____

City of Appleton Approval _____ **Date** _____

Building Official Approval _____ **Date** _____

Building Permit No. _____
Amount Due _____