

BUILDING PERMIT APPLICATION: COMMERCIAL/INDUSTRIAL

590 40th Avenue NE, Columbia Heights, MN 55421 ▪ PH: 763-706-3670 ▪ www.columbiaheightsmn.gov

**COMMUNITY
DEVELOPMENT**

DATE RECEIVED: _____

Please Note	Allow for 2-3 Weeks for a Plan Review of the Submitted Documents		
APPLICANT	<input type="checkbox"/> Property Owner	<input type="checkbox"/> Contractor	Email: _____
SITE ADDRESS	_____		
PROPERTY OWNER / TENANT	Name: _____ Phone: _____ Address _____ City: _____ State: _____ Zip: _____		
CONTRACTOR Note: A City License is required for Comm/Ind/Inst work	Name: _____ Phone: _____ Address: _____ City: _____ State: _____ Zip: _____		
ARCHITECT / ENGINEER	Name: _____ Phone: _____ Address: _____ City: _____ State: _____ Zip: _____		
PROPERTY TYPE	<input type="checkbox"/> Commercial / Industrial	<input type="checkbox"/> Institutional	<input type="checkbox"/> Multi-Family <input type="checkbox"/> Townhouse
TYPE OF WORK Please select all that apply	<input type="checkbox"/> Addition <input type="checkbox"/> Deck <input type="checkbox"/> Drain Tile <input type="checkbox"/> Fire Alarm System	<input type="checkbox"/> Garage / Shed <input type="checkbox"/> New Construction <input type="checkbox"/> Remodel <input type="checkbox"/> Roofing	<input type="checkbox"/> Siding <input type="checkbox"/> Sprinkler System <input type="checkbox"/> Windows / Doors <input type="checkbox"/> Other
PLEASE SUBMIT	1. Two (2) Sets of Construction Plans 2. Survey / Site Plan	3. Landscape Plans 4. Energy Calculations	5. City License Application 6. Special Inspection Schedule
DESCRIPTION OF WORK	Square Footage: _____ Stories: _____ Number of Units: _____		
USE OF PROPERTY	_____		
VALUATION Labor and Materials	\$ _____	All Fees are Based on the job Valuation. The City of Columbia Heights uses an amended version of the 1997 U.B.C. Fee Schedule.	

THIS IS AN APPLICATION FOR A PERMIT - NOT VALID UNTIL PROCESSED

I hereby apply for a building permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Columbia Heights and with the Minnesota Construction Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

PRINT NAME: _____ **DATE:** _____

SIGNATURE OF APPLICANT: _____

PERMIT FEE:	\$ _____	Based on valuation--(Call for a Quote) 763-706-3670—Minimum fee of \$35
PLAN REVIEW:	\$ _____	
SURCHARGE:	\$ _____	(0.0005) Times the Job Valuation
SAC CHARGE:	\$ _____	
CONTRACT LICENSE:	\$ _____	
TOTAL DUE:	\$ _____	Make Checks Payable to the City of Columbia Heights