

**APPLICATION FOR BUILDING PERMIT  
CITY OF BROWNS VALLEY  
P.O. BOX 334, BROWNS VALLEY, MN 56219  
320-695-2110 or cityadminbv@prtel.com**

Box 1

For City Use Only Box 2  
 Building Permit No. \_\_\_\_\_  
 Date Received/Paid \_\_\_\_\_  
 Date **Council** Approved \_\_\_\_\_

**Residential (Based on Valuation – Compute on Reverse)**

\_\_\_ House \$ \_\_\_\_\_  
 \_\_\_ Remodel (Applicant Valuation) \$ \_\_\_\_\_  
 \_\_\_ Attached Garage \$ \_\_\_\_\_  
 \_\_\_ Deck/Porch \$ \_\_\_\_\_  
 \_\_\_ Detached Garage/Shed \$ \_\_\_\_\_  
 \_\_\_ Modular/Manufactured Home \$ \_\_\_\_\_

**Maintenance – Residential**

Box 3

\_\_\_ Mechanical  
 \_\_\_ Re-roof (\$25.00)  
 \_\_\_ Siding (\$25.00)  
 \_\_\_ Windows/Doors – Enlarged Size – (\$25.00)  
 \_\_\_ Miscellaneous Repair

**Commercial (Based on state valuation)**

\_\_\_ Architect – Required \$ \_\_\_\_\_  
 \_\_\_ Non-Architect (includes Maint. Permits) \$ \_\_\_\_\_

**Demolition (Asbestos inspection and lab fees not include)**

\_\_\_ Residential  
 \_\_\_ Commercial

Work being done: \_\_\_\_\_

**Remember to call Gopher State One Call before you dig... 1-800-252-1166**

**Please print:**

**Parcel ID** \_\_\_\_\_ Box 4

Job Site Address \_\_\_\_\_  
 Owner's Name \_\_\_\_\_  
 Owner's Address \_\_\_\_\_  
 Owner's Telephone Number \_\_\_\_\_  
 Contractor's Name \_\_\_\_\_ License No. \_\_\_\_\_  
 Contractor's Address \_\_\_\_\_ Phone No. \_\_\_\_\_

This permit becomes null and void if work or construction authorized is not commenced within six (6) months. Applications for permit shall be accompanied by a description of work being done, site plan, and materials being used. Building permit card shall be posted conspicuously at job site during construction. No part of any building area authorized by this permit may be occupied until final inspection and issuance of a Certificate of Occupancy (if applicable) by the Building Official.

**DO NOT BEGIN CONSTRUCTION UNTIL THIS PERMIT HAS BEEN VALIDATED AND BUILDING SETBACK LINES HAVE BEEN APPROVED BY THE BUILDING OFFICIAL.**

Printed Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

**CALCULATED VALUATION** \$ \_\_\_\_\_

Box 5

**BUILDING PERMIT CHARGES**

**CITY CHARGES**

Permit Fee \$5.00 or by value \$ \_\_\_\_\_  
 Comm. Plan Review + Surcharge \$ \_\_\_\_\_  
 Surcharge \$ \_\_\_\_\_  
**(A) PERMIT FEE** \$ \_\_\_\_\_

Water Connect \$ \_\_\_\_\_  
 Sewer Connect \$ \_\_\_\_\_  
**(B) TOTAL CITY FEE** \$ \_\_\_\_\_  
**(C) TOTAL SUM OF CHARGES** \$ \_\_\_\_\_

Approved for Issuance by: \_\_\_\_\_  
 Signature of Building Official \_\_\_\_\_ Date \_\_\_\_\_

Box 6

Building Official Notes/Special Conditions: \_\_\_\_\_

LAND USE PERMITS

Total Valuation

\$1.00 - \$25,000.00 \$ 25.00

\$25,000.00-\$50,000.00 \$ 50.00

more than \$50,000.00 \$ 100.00

State Surcharge (based on project cost-commercial) \$ 0.0005 (Ex. \$10,000 x .0005) = \$5.00  
**Base surcharge is \$5.00**

Bins considered Ag. Elevator office considered Commercial

Commercial / residential plan \$35.00 hr Plus  
review surcharge

