



CITY OF ST JAMES
BUILDING/MECHANICAL/PLUMBING
PERMIT APPLICATION
 PHONE: 507-375-3241
 Fax 507-375-4376

PERMIT No. _____
 Date _____
 Received by _____

Applicant complete top portions of form and remember to call Gopher One 1-800-252-1166 before digging of any kind.

Applicant Information

Full Name: _____ Date: _____
 Address: _____
 Phone: _____ Email: _____

Contractor Information

General Contractor: _____ License # _____ Phone: _____
 Plumbing Contractor: _____ License # _____ Phone: _____
 Mechanical Contractor: _____ License # _____ Phone: _____
 Electrician: _____ License # _____ Phone: _____

Building Information

Location of Project if not Applicants Address: _____
 Description of work: _____ Valuation: _____
Class of work: _____ **Project type:** _____
 ___ New ___ Addition ___ Remodel ___ Repair ___ Residing ___ Single Family ___ Multi Family
 ___ Reroofing ___ Plumbing ___ Mechanical ___ Replace ___ Other ___ Commercial ___ Public

Construction Data

Construction and Site Plans Attached (two copies)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Prebuilt 1978?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

City Use Only

Special Conditions or Approvals:	Fees:
Zoning _____	Building Permit _____ Plan Review _____
_____	Electric Connection _____ State Surcharge _____
Building _____	Water Connection _____ Plumbing _____
_____	Sewer Connection _____ Mechanical _____
Public Works _____	Other _____
	Total _____

Disclaimer and Signature

*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 or the performance of construction. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced. **It is the responsibility of the applicant to call the Building Official at 507-375-3241 to schedule an appointment 24 hrs. in advance.***

Applicant/Contractor Signature: _____ Date: _____
 Building Official Signature: _____ Date: _____