

# City of West St. Paul

Community Development Department - Phone: 651-552-4116 - FAX: 651-552-4190

1616 Humboldt Ave - West St Paul MN 55118

## Building Permit Application

Permit Number: BLDG2019-_____		Application Date: _____	
Project Address:			
<b>PROPERTY TYPE:</b>			
<input type="radio"/> Single Family Residential		<input type="radio"/> Apartment Complex	
<input type="radio"/> Multi-Family Residential (2-4 units)		<input type="radio"/> Commercial	
<b>SITE/OWNER</b>			
Name:			
Address:			
Phone:		E-Mail:	
<b>ARCHITECT/ENGINEER</b>			
Company Name:			
Address:			
Phone:		E-Mail:	
<b>CONTRACTOR</b>			
Company Name:			
Address:			
Phone:		E-Mail:	
State License #:		Contact Name:	
Signature: _____		Date: _____	
<b>PROJECT INFORMATION</b>			
Project Valuation:		Project Description:	
<b>FEES</b>			
<b>FLAT FEE PERMITS: Residential Siding, Roofing, Window, Door Permits:</b>			
Homeowner: Permit Fee (\$95) + State Surcharge (\$1) = \$96.00			
Contractor: Permit Fee (\$95) + State Surcharge (\$1) + License Verification (\$5) = \$101.00			
<b>HOMEOWNER PROJECTS: By signing this document, I certify that I am the OWNER and the property is listed as HOMESTEAD with Dakota County as defined by MN Statute 273.124 and will legally perform the BUILDING work at this property.</b>			
HOMEOWNER SIGNATURE:		DATE:	
<b>CONTRACTOR PROJECTS: I certify that my building CONTRACTING COMPANY will perform all BUILDING work at this property.</b>			
CONTRACTOR SIGNATURE:		DATE:	
*Permit Fee is based valuation as per the 1997 UBC Permit Fee Schedule.		**State Surcharge is .0005 x project value with no minimum. Consult fee schedule to calculate surcharge for projects valueing over \$1,000,000.00.	