

CITY OF GRANITE FALLS PERMIT APPLICATION

FOR RESIDENTIAL, REROOF, RESIDE, AND WINDOW REPLACEMENT

Return all forms to: City of Granite Falls
 Building Department
 641 Prentice Street
 Granite Falls, MN 56241

Building Official Contact:
 Cell 1: (320) 226-5189 Cell 2: (507) 351-4599 Fax: (651) 846-6034
 Cell 3: (507) 430-2679

Office Use Only	
Building Permit No.	_____
Date Received:	_____
Reroof	\$ _____
Reside	\$ _____
Window Replacement	\$ _____
Surcharge	\$ _____
Total	\$ _____

Applicant must fill out all information on this form that is applicable to the project - Please Type or Print

SECTION 1- DIRECTORY INFORMATION

Check appropriate box: Reroof Reside Window Replacement

Project Street Address: _____ Zoning District: _____
 Owners Name: _____ Phone: _____
 Address: _____
 Contractor: _____ Phone: _____
 Address: _____ License No.: _____
 Comments: _____
 Address: _____
 Applicant's Estimated Construction Cost (include materials & labor) \$ _____


SECTION 2- TYPE OF CONSTRUCTION

IMPORTANT: If any gas meters need to be moved, contact Great Plains Natural Gas Company.
 If electrical wires are above ground, contact Granite Falls Electric Dept. 24 hours in advance at 320-564-4426
 If any water meters need to be moved, contact Granite Falls Water Dept. 24 hours in advance at 320-564-2530.

I hereby certify that I have completed, read and examined this application and know the same to be true and correct, I accept responsibility for compliance with all applicable laws, notifications, and city provisions. The granting of this 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.

Applicant' Signature _____ Date _____
 Applicant's Name - Printed _____
 Email Address _____
 Address _____

SECTION 3 - APPROVAL BY BUILDING OFFICIAL

Authorized Approval Signature  _____ Date _____