

**CITY OF WINDOM, MN
ZONING PERMIT APPLICATION**

Permit No: ZP-_____

Date: _____

Applicant complete
top section (Please Print)

Phone: 507-832-8659 or 507-831-6125

PROPERTY
CONTRACTOR

JOB ADDRESS:

OWNER(S): _____ **ADDRESS:** _____ **PHONE:** _____

APPLICANT: _____ **ADDRESS:** _____ **PHONE:** _____

Contractor/Installer: _____ **Phone:** _____

Contractor Address: _____

BUILDING

CLASS OF WORK

- Storage Building Less Than 200 Square Feet
- Deck not attached to house and/or less than 30" tall.
- Fence/Wall/Hedgerow
- New Driveway Installation With Curb Cut (will require a \$300 deposit at time of application.)
- New Driveway Installation Without Curb Cut
- Other Outdoor Structure
- Replace Driveway Paving/Concrete
- Other: _____

DESCRIPTION OF WORK: Include location on property, type of material to be used, and size.

=====CITY USE ONLY BELOW=====

CITY USE

SPECIAL CONDITIONS OR APPROVALS:

ZONING/LAND USE

Zoning District: _____

- Permitted Use
- Conditional Use
- Variance
- Other: _____
- Floodplain
- Shoreland
- Supplemental Permit Attached

Base Flood Elevation: _____ Floor Elevation: _____

Approved By: _____ Date: _____

FEE

City Permit: \$ 50.00

Other: _____ \$ _____

Total: \$ _____

PAYMENT Paid by: _____

Check No.: _____ Amount: \$ _____

Received by: _____

PROPERTY

Lot: _____ Block: _____ Parcel No.: _____

Subdivision: _____

DEPOSIT FOR STREET EXCAVATION:

Paid by: _____

Check No.: _____ Amount: \$ _____

Received by: _____

BUILDING/FENCE MATERIAL TYPE:

NOTICE This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if the construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regarding construction or the performance of construction. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

I hereby certify that I have read and examined this application and know the same to be correct.

Signature of Owner or Authorized Agent

Date

Signature of Building Official

Phone: 507-832-8660

Date

CALL "GOPHER ONE" at 1-800-252-1166 AT LEAST 48 HOURS BEFORE DIGGING OF ANY KIND