

# DETACHED ACCESSORY BUILDING PERMIT APPLICATION

City of Albany-P. O. Box 370, Albany, MN, 56307 (320)845-4244 Fax:(320)845-2346

Permit # _____	Permit Fee: _____
Date Received: _____	Surcharge: _____
PID # _____	Plan Check: _____
<b>For Office Use Only</b>	<b>TOTAL DUE : _____</b>

Site Address _____	
Property Owner(s) Name(s) _____	Daytime Phone # _____
Owner(s) Address (if different from above) _____	
Legal Description of Site LOT: _____ BLOCK: _____ ADDITION: _____	<b>(ONLY ONE DETACHED STRUCTURE PER RESIDENTIAL LOT)</b> Dimension of structure: Length _____ Width _____ Height of structure: Sidewalls _____
APPROXIMATE START DATE: _____ / _____ / _____	
ESTIMATED COST OF PROJECT (including materials & labor): \$ _____	
LICENSED CONTRACTOR'S NAME: _____ (If the owner is acting as his/her own General Contractor, the attached Licensed Contractor Disclaimer must be signed.)	
LICENSE NUMBER: _____	
MAILING ADDRESS: _____ PHONE NUMBER(S): _____	
Provide the following (if applicable):	
MASON & CONCRETE CONTRACTOR _____ PHONE NO: _____	
EXCAVATION CONTRACTOR _____ PHONE NO: _____	
TYPE OF SIDING: _____ WILL BUILDING BE HEATED: YES NO	
FOUNDATION TYPE*: Exhibit 1 Exhibit 2 Exhibit 9 Other (explain) _____ (*See attached Foundations page and circle the Exhibit which applies to your plan.)	
REQUIRED FORMS TO BE SUBMITTED WITH APPLICATION: (Your application will be denied until all the following items are provided)	
<input checked="" type="checkbox"/> Building Permit Checklist <b>All setback measurements must be measured from the building line.</b>	
<input checked="" type="checkbox"/> One Site Plan	
<input checked="" type="checkbox"/> One Set of FULL SIZE Construction Plans with cross sections and one set of SMALL SIZE Construction Plans (8 1/2 x 11)	
<input checked="" type="checkbox"/> Signed property disclaimer	
NOTE: <b>PROPERTY MUST BE STAKED BY 12:00 NOON ON TUESDAY OR THURSDAY FOR INSPECTION. NO EXCEPTIONS!</b>	
CONTACT DAN MARTHALER, BUILDING OFFICIAL, AT 1-320-249-7533 FOR INSPECTION OR QUESTIONS.	

I hereby certify that I have read and examined this application and know the same to be true and correct. All provision of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. I have identified all property boundaries, easements, flood zones, and/or wetlands existing on the property on my site plan and application. The undersigned further agrees the City and its' administrative staff relied on the accurateness of this application, plans and specifications relative to this project and holds the City of Albany, and its employees harmless from all liability arising from the granting of this permit.

\_\_\_\_\_  
AUTHORIZED SIGNATURE OF OWNER OR CONTRACTOR

\_\_\_\_\_  
TOM SCHNEIDER, ZONING ADMINISTRATOR

\_\_\_\_\_  
DAN MARTHALER, BUILDING OFFICIAL  
1-320-249-7533