



**APPLICATION FOR  
RESIDENTIAL  
BUILDING PERMIT  
CITY OF MELROSE**

225 1<sup>st</sup> St. NE, Melrose, MN 56352

Phone: (320)-256-4278 •

Email: [planning@cityofmelrose.com](mailto:planning@cityofmelrose.com)

[cityofmelrose.com](http://cityofmelrose.com)

Permit No.	
PID No.	
Date Received	
Pd Check #	
Cash Receipt #	

Permit Fee	
Surcharge	
Plan Check	
Total Fee	

Zoning District	
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Please type or Print Legibly:

1. Site Address \_\_\_\_\_ Melrose, MN 56352

2. Owner(s) \_\_\_\_\_

3. Daytime Phone \_\_\_\_\_ Email Address \_\_\_\_\_

4. Owner's Address (if different from above) \_\_\_\_\_

5. Legal Description of Site: (If metes & bounds, please attach description and/or parcel number)

Lot \_\_\_\_\_ Block \_\_\_\_\_ Addition \_\_\_\_\_

6. Which Building (check which applies): Primary  Detached Garage  Other \_\_\_\_\_

7. Type of Improvement:

<b>No Plans Needed:</b>	<b>Window Replacement</b> (same size) <input type="checkbox"/>	<b>Reside</b> <input type="checkbox"/>	<b>Reshingle</b> <input type="checkbox"/>
<b>Plans Needed:</b>	<b>Window Replacement</b> (new/change size) <input type="checkbox"/>	<b>Remodel</b> <input type="checkbox"/>	<b>Deck</b> <input type="checkbox"/>
<b>Swimming Pool</b> <input type="checkbox"/>	<b>New Garage &gt;200 sq. ft.</b> <input type="checkbox"/>	<b>Other</b> _____	

a. Dumpster: Yes  No  Dumpster Location: Driveway  Street  (ROW Permit Required)

    Dumpster Provider: \_\_\_\_\_

b. Shingles (Check if part of project) Asphalt  Wood  Metal  Other \_\_\_\_\_

    Shingles Removed: Yes  No

c. Siding Type (if part of project): \_\_\_\_\_

8. Describe in detail work to be done: \_\_\_\_\_

9. Approximate Start Date: \_\_\_\_\_

10. Contractor's name and license number as required by Minnesota Statute (if no contractor sign disclaimer)

Name \_\_\_\_\_ License # \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email Address \_\_\_\_\_

11. Estimated Cost of Complete Project, including professional labor (even if done by homeowner): \$ \_\_\_\_\_

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 all the provisions of any other state or local law regulating construction.

\*All demolition debris must be contained and disposed of properly. Roadways and gutters must be kept clear of debris.\*

\_\_\_\_\_  
AUTHORIZED SIGNATURE OF OWNER OR BUILDER

\_\_\_\_\_  
ZONING OFFICER

This Permit Expires One Year From: \_\_\_\_\_

\_\_\_\_\_  
BUILDING OFFICIAL

**(CONTINUE TO NEXT PAGE -> ->-> ->->)**

**DISCLAIMER  
OWNER-OCCUPIED,  
RESIDENTIAL PROPERTY OWNER  
PERMIT APPLICANT:**

I understand that the State of Minnesota requires that all residential building, remodeling and roofing contractors obtain a state license unless they qualify for a specific exemption from the licensing requirements. By signing this document, I attest to the fact that I am building or improving this house myself. I hereby claim to be exempt from the state licensing requirements because I am not in the business of building on speculation or for resale and that the house for which I am applying for this permit, located at

(Address) \_\_\_\_\_, Melrose, MN

is the first residential structure I have built or improved in the past 24 months. I also acknowledge that because I do not have a state license, I forfeit any mechanic's lien rights to which I may otherwise have been entitled under Minnesota Statutes 514.01.

Furthermore, I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this house and I understand that some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting, remodeling, and/or roofing activity is a misdemeanor under Minnesota Statutes 326.92, Subd. 1, and that I would forfeit my rights to reimbursement from the Contractor's Recovery Fund in the event that any contractors I hire are unlicensed.

I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the State Building Code and/or City ordinance in connection with the work performed on this property.

I understand that if the house is a rental home or is not currently owner-occupied or intended to be owner-occupied after completion of the work, a State-licensed contractor is required to complete the labor.

\_\_\_\_\_  
Signature of Residential, Owner-Occupied Property Owner

\_\_\_\_\_  
Date

**To determine whether a particular contractor is required to be licensed, or to check on the licensing status of individual contractors, please call the Minnesota Department of Commerce, Enforcement Division, at (612) 296-2594 or toll free at 1-800-657-3602.**