

Dodge County Zoning Permit Application

721 Main St N- Dept. 123 - Mantorville, MN 55955
Phone (507) 635-6272

#24- _____

Cost \$ _____
Check # _____
Receipt # _____

Permit Fees:

***Ag/Accessory Structures:**
\$1 per thousand - minimum fee \$100

****New or addition(s) to dwelling (including TSDU/ADU):**
\$2 per thousand- minimum fee of \$200

*****New or addition(s) to commercial/industrial structure:**
\$3 per thousand -minimum fee of \$300

******After-the-fact permits are triple (3x) the permit fee******

Applicant: _____ Proposed start date: _____

Current Address: _____ City & Zip: _____

Phone: _____ Email: _____

Contractor's Name: _____ Phone: _____ Email: _____

LEGAL DESCRIPTION: _____

Property Address: _____ Parcel ID#: _____

Township: _____ Section: _____ # of Acres: _____

Subdivision name, lot & block if applies: _____

PERMIT USE: _____

Single Family Dwelling-
(Provide a complete planset/layout)

_____ Number of bedrooms

- Footing
- Accessory Unit-Dwelling
- New Construction
- Mobile Home
- To be moved onto property
- To replace existing home

****Existing home must be removed within 2 years from date of permit issuance: Initials here _____**

Accessory Building – Garage (detached)
Include: plumbing drains or None

Other Accessory Building – Shed
 To be used for vehicle storage
Include: plumbing drains or None
 To be used for animals – If so type & number of animals _____

Additions: _____

Does the new addition or structure have any of the following? New Kitchen New Laundry
 New Bathrooms _____ New Bedrooms _____

Business Structure _____

Other _____

A.) Will the structure be used for a business? _____ Type: _____
What is the distance from the structure to the river, wetland or stream? _____

Dimensions of structure: _____
****Please include the dimension of any decks, porches, lean-to, carports, etc., if applicable.**

Cost of labor and materials: _____
Distance to property lines: Front: _____ Rear: _____ Nearest side: _____

Is the proposed structure and nearest property line(s) **staked*** on site? Yes **Initials here** _____

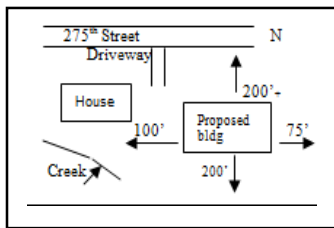
*A **\$50.00** fee will be applied for any additional site inspections and/or if the proposed structure is not staked for inspection.

B.) Performance Standards

Density	Septic System	Surface Waters	Front yard setback	Side & Rear Setbacks
1 dwelling on less than 53 acres per ¼ section	20' from drainfield to structure 10' from septic tank to structure	100' from Ordinary High-Water Level 60' from wetland to structure	50' from ROW (not from the center of the road)	<u>Principal Structure</u> 25' <u>Accessory Structure</u> 10' with signed Ag Covenant

C.) Sketch or attach an 8 ½ x 11 site plan that indicates where the propose building or addition will be located and included the distance from the building to all property lines, rivers, streams, wetlands or bluffs. You can estimate the distance if it exceeds the required setbacks (see above). Also show N arrow, adjacent buildings, driveway, and any other applicable features. A complete plan set will be required to be included with the application for proposed dwellings and for any additions to a dwelling.

* Example of a Site Plan



NOTE: Inspector (Steve Roberts at 507-254-4272 after 7am) should be contacted prior to beginning any electrical work.
Call Gopher State One Call (811) before any digging.
New Addressing is done by the DC Highway Dept.

D.) By submitting this application, the entire contents of which are considered to be public data, I certify and agree that I am the owner and/or the authorized agent of the owner of the above property, and that all uses will conform to the provisions of Dodge County Ordinances. I further certify and agree that I will comply with all conditions imposed in connection with the approval of the application. ***Intentional or unintentional falsification of this application or any attachments thereto will make the application, any approval of the application and any resulting permit invalid.*** Failure to properly provide the adequate information to complete this application will result in the application being returned. I authorize Dodge County staff to inspect the property to review the application and for compliance inspections. **I understand construction is NOT to begin until the permit is issued.** Permits are valid for one (1) year from date of issuance. If construction is not started within that one year timeframe, the permit will be expired. This permit may be revoked at any time at the discretion of the Zoning Administrator. By signing below, I have accepted all the terms and conditions of this permit application.

Applicant's Signature: _____ **Date:** _____

Owner's Signature: _____ **Date:** _____

Township Officer's Signature: _____ **Date:** _____

**** A Township officer's signature does NOT guarantee approval of the permit.**

*****Township Officer's signature is required for Claremont, Ellington, Mantorville, and Milton Townships.**

❖ **Zoning Staff Signature:** _____ **Date:** _____

INTERNAL USE ONLY:

	Initial	Date	Permit #	Notes:
Septic Permit				
Shoreland				
Floodplain				
Hydric Soils/Wetlands				
Slope >12% or >18%				
Karst Features				
Mapped in EGSA				
Aggregate Resources				
Special Features Group				
CUP/IUP #				
Feedlot 1000 ft buffer				
Site Visit Information (Note number of visits)				

Permit Number: _____

PIN: _____

PROPERTY OWNER WAIVER

MINNESOTA STATE CONTRACTOR LICENSING REQUIREMENTS

The purpose of this form is to have property owners acknowledge their responsibilities to the Minnesota Building Code, to Zoning Ordinances, and to other applicable rules and regulations when they are acting as general contractor in building practices.

I understand that the State of Minnesota requires that all Commercial and Residential Building Contractors, Remodelers, and Roofers, obtain a State License unless they qualify for a specific exemption from the licensing requirements. By signing this waiver, I attest to the fact that I am building or improving my property myself. I claim to be exempt from the State License requirements because I am not in the business of building on speculation or for resale and this is the first residential structure that I have built or improved in the past 24 months.

I 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 State Statute 514.01

I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this property. Some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed commercial contracting, residential contracting, remodeling, and/or roofing activity is a misdemeanor under Minnesota State Statute 326B.845, subdivision 1, and that I forfeit my rights to reimbursement from the Contractor's Recovery Fund in the event that any contractors that I hire are unlicensed.

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

Signature of Property Owner

Date

Project Address

City, State, Zip

Check <https://secure.doli.state.mn.us/licensing/licensing.aspx> to find a contractor's license number or call the Minnesota Department of Labor and Industry, Construction Codes and Licensing at 651-284-5012 or 1-800-657-3944. Mail monthly permits with no contractor's license number to PO Box 64217, St Paul, MN 55164-0217.