

City of Sandstone
119 Fourth Street
P O Box 641
Sandstone, MN 55063
320-245-5241 (Fax) 320-245-5502

Maintenance Permit Application
 (For 1 and 2 family owner occupied dwellings)

1) SITE INFORMATION						(Do not write in shaded areas)	
Project Address: Include Building or Suite No. Project address				Date Applied	Permit No. (City Use Only)		
Lot No.	Block No.	Subdivision Name		Parcel No. (Required) R 45. _____	Valuation	\$39.00	
Owner Name				New Use	Surcharge	\$ 1.00	
Mailing Address of Owner				Existing Use			
City	State	Zip	Telephone	Total Fee	\$40.00		
2) PROJECT DESCRIPTION (Each type of work is a separate fee)							
Description of Work					Construction Value NA		
<input type="checkbox"/> Roofing	Existing roofing must be removed. A Second layer of roofing applied over an existing layer of roofing must be approved by the Building Official before the work is started. Ice and water barrier must be installed from the eve to a point 24" inside of the exterior wall.					Code	
<input type="checkbox"/> Windows & Doors						Type of Construction	
<input type="checkbox"/> Siding	Install weather Resistive under siding.					Occupancy Type	
<input type="checkbox"/> Heating, Air Conditioning, Water Heater	Furnace <input type="checkbox"/> Boiler <input type="checkbox"/> Water Heater <input type="checkbox"/> Air Conditioner <input type="checkbox"/>					Sprinklers	
Plumbing Contractor			Plumber Phone #	Bond #	Project Code		
Heating Contractor			Heating Phone #	Bond #			
3) CONTRACTOR INFORMATION							
Contractor Name							
Address			City	State	Zip	Telephone	
Licensed Contractor's Declaration: I hereby affirm that I am licensed under provisions of Minnesota Statute 326.84. BC Lic # _____							
Signature		Title			Date		
4) OWNER/BUILDER DECLARATION							
I hereby affirm that I am exempt from the State Contractor's License Law: I am building or improving my property by 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. (Owner / Builder must also file "Property Owner Waiver" if the contractor's license number is not listed on this application.)							
Signature		Print Name			Date		
5) APPLICANTS SIGNATURE (Check One) <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Authorized Agent							
I hereby certify that I have read this application and state that the above information is correct and that I am the owner or the duly authorized agent of the owner. I agree all work will comply with all ordinances and codes of the City, the State of Minnesota and rulings of the building department. I hereby authorize representatives of the City to enter upon the above-mentioned property for inspection purposes. I understand the issuance of a permit and the inspections conducted does not constitute any sort of guarantee from the city that the structure is in perfect compliance with the State Building Code. A homeowner may procure the services of a private inspector if they desire additional protection.							
Signature		Print Name			Date		
Office use only							
Approved By:					Date		