

Parking Lot Permit Application

							Oπice use only		
						Permit no.			
Site address						Date			
Tenant/building name						Suite/unit no.			
Applicant is	☐ Architect/engineer ☐ Contractor ☐ Owner					Condominium no.			
		Proper	rty owner	1					
Name						Phone			
Address		City				State	Zip		
		Con	tractor						
Name						License no.			
Address			City		State	Zip			
Contact person	Phone				Cell phone				
		Archited	ct/engine	er					
Name						Registratio	n no.		
Address		City		State	Zip				
Contact person	erson Phone				Cell phone				
		Class	of work						
Check only one.	only one.				☐ 2 Addition				
	☐ 3 Alteration/remodel ☐ 4 Type of structure				4 Maintenance/repair/replace				
Observations			structur						
Check only one.					sement				
	\square 02 Single-family connected to single family \square 46 Other					non-housekeeping shelter			
	□ 03 Residential garage □ 65 Indu			65 Indust	trial buildings				
	☐ 30 Two-family residential ☐ 70 Publ			70 Public	c works and utilities building				
	☐ 31 Three-four family residential ☐			80 Public	lic schools				
	☐ 32 Multiple-family residential				81 Privat	Private schools			
	☐ 40 Offices, banks, professional				85 Churc	nurches and religious buildings			
	☐ 41 Stores, restaurants, warehouse				88 Hospi	ospitals and institutional buildings			
	☐ 42 Hotels, motels				93 Other	er non-residential building			
	☐ 43 Parking garage				95 Fence	nces, signs, antennas			
	☐ 44 Service sta	ations and repair gar	age		96 Other	non-building	structures		

Continue to page 2

Project details									
Job valuation \$	Estimated completion date								
Description of work to be done									
Please read and sign									
will be in conformance with the ordinances and I understand this is not a permit but only an app	knowledge that the information above is complete and accurate; that the work codes of the City of Bloomington and with the Minnesota Building Codes; that dication for a permit and work is not to start without a permit; that the work will case of all work which requires review and approval of plans.								
Applicant's printed name	Applicant's signature Date								
Do not write below this line									
Inspector no									
Conditions of issuance									
Valuation \$									
Plan check fee?	Amount \$								
Other lees? Tes No Describe	Amount \$								
Permit approved by	Date								
Reference no									

web53_016 (04/14) Pg2 of 2