## ZONING PERMIT APPLICATION CITY OF HOFFMAN

## PO BOX 227 HOFFMAN, MN 56339

PHONE: 320-986-2448

Please print:				
Job site Address				
Owner's Name:				
Owner's Address			Hott	fman, MN 56339
Owner's Telephone	Number	emai	l address:	
Contractor Name				
Contractor AddressPhone No				
Legal Description _				
Description of Propo	osed Work			
Type and Use of Structure				_
What will the use of				
Type of Construction Class of WorkN				
Does the Work involution  Plumbing Electrical Electrica	lectricalMechar	nical (Heating/Venti	lation/Refrigeratio	on/Air Conditioning)
<i>U</i>				
Lot: Area Yard:	Front	Side	e	Sq. Ft Back
Building Construction	on:			
Depth	Height	Stories		
Type of Material		<del></del>		
Are the setbacks to t	he street line at lea	st 30 feet?		
Is the structure withi	n the zoning ordina	ance of 4 feet from	n the side prope	erty lines?
If within the new addordinance of 9 feet for				_
Do you need a speci	al variance?			

Are the plans or drawing of the proposed work you are applying for attached?
Please include the permit fee of \$25.00 (If the permit is not approved your fee will be returned)
This permit becomes null and void if work or construction authorized is not commenced within one (1) year, or if construction or work is suspended or abandoned for a period of six (6) months at any time after work is commenced. Application for permit shall be accompanied by a complete set of plans. Zoning permit shall be posted conspicuously at job site during construction. DO NOT BEGIN CONSTRUCTION UNTIL THIS PERMIT HAS BEEN VALIDATED AND BUILDING SETBACK LINES HAVE BEEN APPROVED BY THE CITY COUNCIL.
I have received a copy of the Zoning Ordinance and will comply with all regulations of the City of Hoffman.
Signature of Applicant
Approved by City Council on
DETAIL DRAWING IF PLANS ARE NOT ATTACHED: