



CITY OF LITTLE CANADA

515 Little Canada Road East, Little Canada, Minnesota, 55117

Phone: 651-766-4029 • Fax: 651-766-4048 • E-mail: permits@littlecanadamn.org

Driveway • Parking Lot • Fence Permit Application # _____

Project Address		Property Type	() Residential () Commercial
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Property Owner Information

Name:		Contact Phone #	
Address:	City:	State:	Zip:
E-mail:			

Applicant Type	<input type="checkbox"/> Contractor <input type="checkbox"/> Property Owner (same information as above OR complete section below)
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Applicant / Contractor Information

Applicant Name:		Contact Phone #	
Company Name (if applies)		Contractor License #	
Address:	City:	State:	Zip:
E-mail:			

Project Details

Project Details	Fees
Driveway/Parking Lot: Submit application with site plan and project overview including setbacks and project dimensions. Fence: Submit application with site plan with fence location highlighted. Include height, length, and materials used. Reason for Work: <input type="checkbox"/> Alteration <input type="checkbox"/> New <input type="checkbox"/> Repair Description of Work: _____ _____ _____	Permit Fee – Fence Fence height 6' or less....\$50 Fence height over 6'..... \$75 \$
	Permit Fee – Driveway/Parking Lot R1 & R2 properties up to 1,500 SF.....\$50 R1 & R2 properties over 1,500 SF.....\$100 R3, R4, & Commercial properties up to 50,000 SF....\$100 R3, R4, & Commercial properties over 50,000 SF.....\$100 + SF over 50,000 x .0002 \$
	Other Fee \$
	TOTAL PERMIT FEE \$

Notice

- Contractors must be state licensed OR obtain a City contractor license.
- This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if abandoned or suspended for a period of 180 days at any time after work has begun.
- I certify that all work will be done in accordance with the building codes and ordinances adopted by the City of Little Canada on the date that application is mad. I assume full responsibility for the progress and completion of the work authorized by this permit.

_____ Applicant Signature Date	APPROVAL _____ Building Official Date
_____ Applicant Printed Name	