

## 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		1	Property		ty TypeResidenti		Commercial
Property Owner Information							
Name:				Contact Phone #			
Address:			ity:		State:		Zip:
E-mail:							
Applicant TypeContractor Property Owner (same information as above OR complete section below)							
Applicant / Contractor Information							
Applicant Name: Contact Phone #							
Company Name (if app	I		Contractor License #				
Address:				State:			Zip:
E-mail:							
Project Details				Fees			
<b>Driveway/Parking Lot:</b> Submit application with site plan and project overview including setbacks and project dimensions.				Permit Fee – Driveway/Parking Lot			\$
<b>Fence:</b> Submit application with site plan with fence location highlighted. Include height, length, and materials used.				Permit Fee – Fence Based on value according to League of MN Cities guidelines.			\$
Reason for Work:AlterationNew				Fence Value:			•
Description of Work:				Other Fee			\$
			[	TOTAL PERMIT FEE		ERMIT FEE	\$
Notice							
Contractors must be	e state licensed OR obtain a City cont	tractor lic	ense.				
	es null and void if work or construction nded for a period of 180 days at any ti					vithin 180 day	s, or if
	k will be done in accordance with the l date that application is mad. I assuments his permit.						
		APP	APPROVAL				
Applicant Signature	Date						
Applicant Printed Name			Building Official				Date