



CITY OF NEW HOPE COMMUNITY DEVELOPMENT

4401 Xylon Ave N • New Hope MN 55428 • Phone: 763-531-5127

• newhopemn.gov • newhopeinspections@newhopemn.gov

RESIDENTIAL BUILDING APPLICATION

PROCESS

- For deck work, please fill out Residential Deck Application.
- Separate permits are required for electrical, plumbing, heating, ventilating and air conditioning.

INCLUDE THE FOLLOWING ITEMS:

- ✓ Residential Building Application (this sheet) filled out completely.
- ✓ 2 set plans
- ✓ Payment (see below)

Permit# _____

Received Application _____

Received Payment _____

For Office Use Only

PROPERTY INFORMATION

Property Address: _____

I am the Contractor I am the Property Owner (*See bottom of page 2 of application)

PROPERTY OWNER INFORMATION

Property Owner: _____

Contact Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Email: _____

CONTRACTOR INFORMATION

Business Name: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

State License#: _____ Exp. Date: _____

Lead Certification#: _____ Exp. Date: _____

WORK INFORMATION

- | | | | | |
|--|--|--|----------------------------------|--|
| <input type="checkbox"/> Addition | <input type="checkbox"/> Demolition | <input type="checkbox"/> Move Building | <input type="checkbox"/> Re-Roof | <input type="checkbox"/> Replace |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Doors/Windows | <input type="checkbox"/> New | <input type="checkbox"/> Remodel | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Basement Finish | <input type="checkbox"/> Drain Tile | <input type="checkbox"/> Other | <input type="checkbox"/> Repair | <input type="checkbox"/> Siding/Soffit/ Fascia |

Description of Work: _____

Value of Work Including Labor: \$ _____ Start Date: _____ Estimated Completion Date: _____

REQUIRED INSPECTIONS COMPLETED BY CITY STAFF

- | | | | | |
|-------------------------------------|---|---|---------------------------------------|---|
| <input type="checkbox"/> Brace Wall | <input type="checkbox"/> Foundation | <input type="checkbox"/> Insulation | <input type="checkbox"/> Poured Walls | <input type="checkbox"/> Under Slab Vapor Barrier |
| <input type="checkbox"/> Drain Tile | <input type="checkbox"/> Framing | <input type="checkbox"/> Lath | <input type="checkbox"/> Progress | <input type="checkbox"/> Waterproofing |
| <input type="checkbox"/> Final | <input type="checkbox"/> House Wrap | <input type="checkbox"/> Other | <input type="checkbox"/> Rated Walls | |
| <input type="checkbox"/> Footing | <input type="checkbox"/> Ice Barrier Photos | <input type="checkbox"/> Moisture Barrier | <input type="checkbox"/> Slip Sheet | |

Approved By: _____ Date: _____



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NOTICE

- This permit becomes null and void if work or construction authorized is not commenced within 180 days or work is suspended or abandoned for a period of 180 days at any time after work is commenced.
- I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other State or local law regulating construction or the performance of construction. **Initial here:** _____

Signature: _____ **Date of Application:** _____

FEE SCHEDULE

\$1 - \$500	\$30.30
\$501 - \$2,000	\$30.30 for the first \$500 plus \$3.27 for each additional \$100
\$2,001 - \$25,000	\$79.53 for the first \$2,000 plus \$15.40 for each additional \$1,000
\$25,001 – \$50,000	\$433.55 for the first \$25,000 plus \$11.11 for each additional \$1,000
\$50,000 - \$100,000	\$711.30 for the first \$50,000 plus \$7.70 for each additional \$1,000
License Search	\$5.00
Plan Check	65% of building permit fee

License Search	
SAC Fee	
Permit Fee	
Plan Check Fee	
State Surcharge	
Fees Due Upon Application	

*For more information regarding the fee schedule and additional charges please visit our website newhopemn.gov

PAYMENT

- Check** (Make payable to City of New Hope. Mail Attn: Inspections Department to 4401 Xylon Ave N, New Hope, MN 55428)
- Credit Card** (Fill in information below)
 - Credit Card Number: _____ Expiration Date: _____
 - Billing Address: _____
 - Signature: _____ Name (Print): _____

PROPERTY OWNER AGREEMENT *COMPLETED BY PROPERTY OWNER IF PERFORMING THE WORK THEMSELVES*

I understand that the State of Minnesota requires that all residential building contractors, remodelers and roofers obtain a state license unless they qualify for a specific exemption from the licensing requirements. By signing this document, I attest to the fact that I am building or improving this house myself. I hereby claim to be exempt from the state licensing requirements because I am not in the business of building on speculation or for resale and that the house for which I am applying for this permit, located at _____, is the first residential structure I have built or improved the past twenty-four (24) months. I also acknowledge that because I do not have a state license, I forfeit any mechanic's lien rights to which I may otherwise have been entitled under Minnesota Statute 514.01. In the event that I do construct or improve another residential structure in the next 24 months, I will not do so until I obtain the required state license, per Minnesota Statute 326.84, understanding that failure to do so is a misdemeanor under state law. Furthermore, I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this house and I understand that some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting; remodeling and/or roofing activity is a misdemeanor under Minnesota Statute 326.92, subdivision 1, and that I would forfeit my rights to reimbursement from the Contractor's Recovery Fund in the event that any contractors I hire are unlicensed. I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the state building code and/or city ordinance in connections with the work performed on this property.

Signature: _____ **Date of Application:** _____