

Commercial Permit Application

Tenant Improvement

City of Maple Grove

12800 Arbor Lakes Pkwy, P.O. Box 1180, Maple Grove, MN 55311

CONTACT NUMBERS:

Becky Roy, Administrative Assistant 763-494-6062 (Broy@ci.maple-grove.mn.us)

Larry Huff, Plans Examiner 763-494-6080 (Lhuff@ci.maple-grove.mn.us)

Tenant Address: _____

Occupant: _____

Property Owner

Name: _____ Contact Person: _____

Address: _____ email address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

Contractor

Name: _____ Contact : _____

Address: _____ email address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

Architect/Designer/Engineer

Company: _____ Design Professional: _____

Address: _____ MN State Registration #: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Email address: _____

Description of Work

Commercial/Industrial Educational Institutional Apartments

Work Type

Addition Interior Finish Remodel/Alter Repair

Main Structure

Comm/Ind/Pub – Alter Comm/Ind/Pub - Add

Plan Review Submittal Checklist:

- ____ Completed Permit Application
- ____ 3 Complete Sets of Plans also Showing Location within Building
(all copies must be signed by a registered professional)
- ____ Code Analysis Form
- ____ Completed Certificate of Occupancy Application

Estimated Value of Work Performed _____

Fees and plan review are based on Section 304 and Table 3A of the 1997 UBC.

The undersigned hereby represents upon all of the penalties of the law, for the purpose of inducing the City of Maple Grove to take the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Maple Grove, the state of Minnesota and rulings of the Building Department.

Applicant's Signature: _____ Date: _____

The Applicant is: ____ Owner ____ Contractor ____ Architect

Plan Review Meeting to be scheduled at the time permit application and plans are submitted. Please contact Becky Roy at 763-494-6062 to schedule this meeting.