



8301 Valley Creek Road • Woodbury, Minnesota 55125-3330 • www.ci.woodbury.mn.us
651/714-3543 • TDD 651/714-3568 • FAX 651/714-3501

Permit Application

BUILDING SITE ADDRESS _____

ESTIMATED VALUE OF ALL WORK (Contract Price) TOTAL \$ _____

DESCRIBE WORK APPLIED FOR _____

FOR SIDING REPLACEMENT: NUMBER OF SQUARES _____

FOR ROOF REPLACEMENT: NUMBER OF SQUARES _____

ESTIMATED COMPLETION DATE: _____ (All exterior work must be completed within six months of permit issue date.)

APPLICANT _____ DAY PHONE (____) _____

CHECK ONE: CONTRACTOR (Complete licensing information below.)

HOMEOWNER

ADDRESS _____

CITY _____ STATE _____ ZIP _____

STATE CONTRACTOR LICENSE NUMBER _____

TYPE OF LICENSE _____ EXPIRATION DATE _____

PROPERTY OWNER _____ HOME PHONE (____) _____

ADDRESS (IF DIFFERENT THAN ABOVE) _____

CITY _____ STATE _____ ZIP _____

IF OCCUPANT IS DIFFERENT FROM OWNER, PLEASE LIST:

OCCUPANT _____ PHONE (____) _____

APPLICANT SIGNATURE _____ DATE _____

ESCROW FUNDS WILL BE RETURNED TO THE CONTRACTOR / APPLICANT.

ISSUANCE OF A PERMIT AND INSPECTIONS CONDUCTED DO NOT CONSTITUTE A GUARANTEE OR WARRANTY FROM THE CITY. THE APPLICANT HEREBY AGREES TO DO ALL WORK IN ACCORDANCE WITH THE ORDINANCES OF THE CITY OF WOODBURY, STATE BUILDING CODE, AND THE REQUIREMENTS OF THE BUILDING DEPARTMENT.