



**PROJECT DESCRIPTION**

**RESIDENTIAL (New)**

- OFOT Footing/Foundation
- O101 One Family (detached)
- O102 Two Family (attached)
- O104 Multi-Family – 3 & 4 Units
- O105 5 or more Units
- O330 Garage Slab Only
- O438 Garage (  attached  detached)

**RESIDENTIAL (Existing)**

- ORFA Footing/Foundation
- O432 Deck
- O433 Addition
- O434 Alterations (Val. Of Mat's & Labor) \$ \_\_\_\_\_
- O439 Garage Addition

**COMMERCIAL (New)**

- OFCM Footing/Foundation
- O213 Hotel or Motel
- O318 Recreational
- O319 Church/Religious
- O320 Industrial/Warehouse
- O321 Parking Garage
- O322 Service/Repair Station
- O323 Hospital/Institutional
- O324 Office/Bank
- O325 Public Works & Util.
- O326 School/Educational
- O327 Store/Customer Services
- O501 Sign

(Dimension \_\_\_\_\_ Number of Faces \_\_\_\_\_ Height \_\_\_\_\_)

**COMMERCIAL (Existing)**

- OCFA Footing/Foundation
- O436 Addition
- O437 Alterations (Val. Of Mat's & Labor) \$ \_\_\_\_\_

**MISCELLANEOUS**

- O328 Nonresidential Building (pole barn, storage shed, etc.)
- O329 Structures Other Than Buildings (pools, retaining walls, canopy, etc.)
- O700 Mechanical
- O700 Mechanical A/C
- O700 Fireplace
- O710 Plumbing
- O710 Gas Piping
- O760 Furnace Replacement
- O770 Water Htr. Repl.
- Other

**GENERAL INFORMATION**

No. Dwelling Units \_\_\_\_\_ No. Stories \_\_\_\_\_ Occupancy Type \_\_\_\_\_ Construction Type \_\_\_\_\_

**Square Footage:**

Above Basement	Basement <input type="checkbox"/> Finished <input type="checkbox"/> Semi-finished/unfinished <input type="checkbox"/> Existing	Garage	Porch	Deck
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**Estimated Value (labor + material) of Construction**

Other: (describe) \_\_\_\_\_ \$ \_\_\_\_\_

**I hereby apply for a Building/Zoning Permit, and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances of the City of Byron and with the Minnesota Building Codes; that I understand this is not a permit, but only a application for a permit, and work is not to start without a permit; and that the work will be in accordance with the approved plan in the case of work which requires a review and approval of plans.**

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY**

**ZONING REVIEW**

Zoning District \_\_\_\_\_ Site Plan \_\_\_\_\_ Bldg. Height \_\_\_\_\_

Required Setbacks: Front \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_ Side Street \_\_\_\_\_

Comments \_\_\_\_\_

Zoning Administrator \_\_\_\_\_ Date \_\_\_\_\_

**BUILDING REVIEW**

Comments \_\_\_\_\_

Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

**APPLICATION APPROVED BY:** \_\_\_\_\_ **Date** \_\_\_\_\_

**BUILDING OFFICIAL**