



883 261st Ave N.E. • Isanti, MN 55040
Phone (763) 444-8097
E-Mail: zoning@athenstownship.com

ALTERATION PERMIT APPLICATION

SITE ADDRESS _____ Owner-occupied? YES [] NO []

Owner's Name _____ Cell _____

Home Phone _____ Email _____

Septic System? YES [] NO [] If yes, adding bedrooms requires Septic Compliance Inspection and Certificate of Compliance

Contractor _____ License # _____

Contact Person _____ Cell _____ Lead Cert # _____

Address _____ Office Phone _____

PERMIT TYPE

- [] SWIMMING POOL (in ground) -----Value Based Fee
[] BASEMENT FINISH (include plans) -----Value Based Fee
[] ALTERATION/INTERIOR REMODEL (include plans) -----Value Based Fee
[] RESTORATION (include plans) -----Value Based Fee

DESCRIPTION OF REPAIR _____

ESTIMATED VALUE OF WORK PERFORMED \$ _____

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has 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.

Signature of Owner or permit holder

email of applicant

Date