## CITY OF PENNOCK PERMIT APPLICATION FOR RESIDENTIAL, REROOF, RESIDE, AND WINDOW REPLACEMENT

Return all forms to:	205 NW 2 <sup>nd</sup> St. PO Box 159 Pennock, MN 56279 Phone: 320-599-4546	City Pin: Lot: Block:	_ Date Received:		
Applicant must fill	Fax: 320-599-4549  out all information on the	Addition:  nis form that is applicable to	<ul><li>Reside</li><li>Window Replacement</li><li>Surcharge</li><li>Total</li></ul>	\$ \$	
	ECTORY INFORMATION				
Chec	k appropriate box:	Reroof  Reside	Window Replaceme	nt 🗆	
Project Street Address:			_ Zoning District:		
Owner:			Phone:		
Address:					
Contractor:			Phone:		
Address:					
I hereby cert and correct, provisions. ' provision of Applicant's ' Applicant's	I accept responsibility for The granting of this permi any other state or local law Signature:  Name – Printed:	ATURE read and examined this applicate compliance with all applicable t does not presume to give author regulating construction or the	laws, notifications, and nority to violate or cance e performance of constru	city I the ction.	
anamica a series		ANIC APPLICATION			
SECTION 3 – APPI	ROVAL BY CITY BUILI	DING OFFICIAL			
Authorized A	Approval Signature:		Date:		