

CITY OF SHOREVIEW
4600 N. Victoria Street

Email applications and site plan to:
zoningpermits@shoreviewmn.gov



DATE APPLIED: _____

PERMIT #: _____

RESIDENTIAL ZONING PERMIT APPLICATION

Any project nearing the minimum setback or on the property line, **will require the property pins be exposed for final inspection.*

Site Address _____	
Homeowner _____	Phone _____
Applicant Name _____	Phone _____
Address _____	
E-Mail Address _____	
<input type="checkbox"/> Driveway/Parking Pads/Patios – <i>attach a site plan</i>	
Replace as-is: _____ Expansion: _____ Driveway Material: _____	
Comments: _____	
<input type="checkbox"/> Fences – <i>attach a site plan</i>	
Height: _____ Material: _____ Location/Comments: _____	
<input type="checkbox"/> Accessory Structure 200 sqft and under (sheds) - <i>attach a site plan</i>	
Size: _____	Square Feet: _____
Height: _____	Wall height: _____
Exterior Finish: _____	Setback from properties lines: _____
Other Information: _____	
<input type="checkbox"/> Deck (Under 30", not attached) - <i>attach a site plan</i>	
Size: _____	Height: _____
Setback from properties lines: _____	
SIGNATURE - THIS IS AN APPLICATION FOR A PERMIT. NOT THE ACTUAL PERMIT	
THE UNDERSIGNED HEREBY AGREES TO ALL WORK IN ACCORDANCE WITH SHOREVIEW CITY CODE AND THE DECISION OF THE COMMUNITY DEVELOPMENT DEPARTMENT	
Applicant Signature _____	Date _____
FOR OFFICE USE ONLY - Approvals:	
PLANNING: _____	DATE: _____
OTHER: _____	DATE: _____
Does/Did this project require City Council or Planning Commission authorization: _____ Yes _____ No	
File Number (Attach Conditions) _____	
FEES	
All Zoning Permits: \$ 49.00 _____	Street Repair Escrow \$ _____
Erosion Control Escrow: \$ _____	Planning/Landscape Escrow \$ _____
Erosion Control Inspection: \$ _____	Other \$ _____
Tree Escrow \$ _____	State Surcharge \$ 1.00 _____
TOTALS \$ _____	