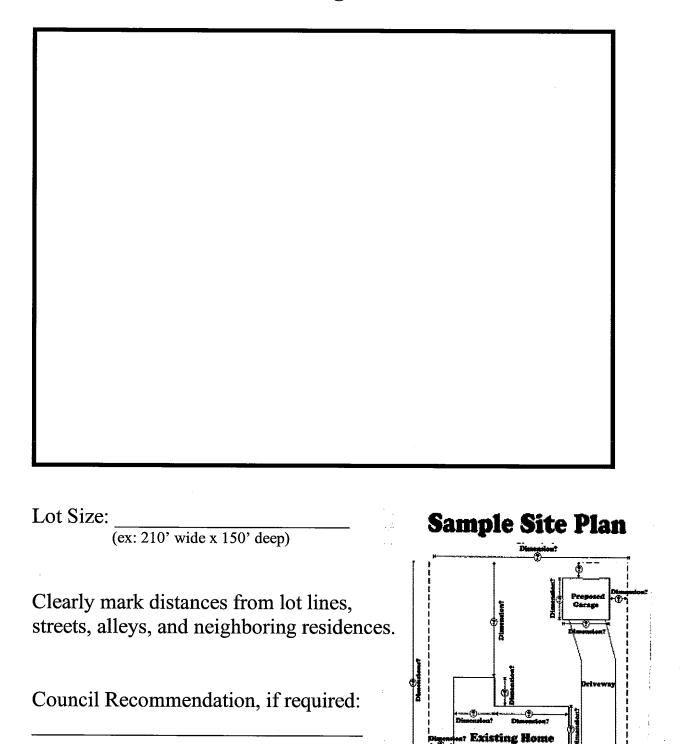


Owner's Name:	
Address:	
Phone:	
Site Location:	
Proposed Structure:	
Select type of construc	tion:
Estimated Job Cost:	\$
Building Contractor: (Address & Phone)	
Heating Contractor: (Address & Phone)	
Plumbing Contractor: (Address & Phone)	
⇒PLEASE COMPLE	TE THE SITE DIAGRAM ON BACK OF THIS FORM⇔
	in compliance with the requirements of the City of Alden and ated for issuance of a construction permit by the county.
PROPERTY OWNER: _	Date:
CITY OFFICIAL:	Date:

DO NOT START CONSTRUCTION UNTIL YOU RECEIVE YOUR BUILDING PERMIT AT THE FREEBORN COUNTY ENVIRONMENTAL SERVICES DEPARTMENT (507)377-5186

Site Diagram



Front Lot Line

Street

Curb_