



Community Development Department
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www.rochestermn.gov/cd

Master Plan Plan Review Application

Office Use Only
App. No. _____

One- and Two-Family Dwellings and Multiple Single-Family Dwellings (Townhouses)

Application Date _____

Applicant is: Contractor Architect/Designer Other (describe) _____

Master Plan Details

Description: _____

Style: _____

Building Code used for design: _____

Number of Units: _____ Number of Stories: _____ Total Square Footage _____

Square Footage Calculations:

Main Level: Finished _____ Unfinished _____

Basement Level: Finished _____ Unfinished _____

Other: _____ Finished _____ Unfinished _____

List possible construction options:

Basement types: Walkout _____ Lookout/Daylight _____ Full _____

Foundation materials: Poured concrete _____ Masonry _____ Wood _____

Other options: _____

Contractor

Company _____ MN Contr. Lic. _____

Phone _____ - _____ - _____ E-mail _____

Name _____
Last First MI

Address _____

City _____ State _____ Zip Code _____

Architect/ Designer

Company _____ MN Registration # _____

Phone _____ - _____ - _____ E-mail _____

Name _____
Last First MI

Address _____

City _____ State _____ Zip Code _____

I hereby apply for a plan review for a Master Plan, and I certify that the information above is complete and accurate. I understand this is not a permit but only an application for plan review of a Master Plan in accordance with Minnesota Rules 1300.0160 Subparts 5 and 6.

Applicant's Signature

Date

DO NOT WRITE BELOW THIS LINE – Building Safety Office Use Only

Comments:

Permit Approved by: _____

Plans Examiner Signature

Date