

NOTICE:

Applications for building permits will not be reviewed until all of the required information has been submitted.

Once all items are submitted a minimum of ten (10) working days are required to process the application.



City Of Wyoming - Department Of Building Safety
26885 Forest Blvd., PO Box 188
Wyoming, MN 55092
Phone (651) 462-4947 Fax (651) 462-3938

Requirements for Application for Building Permit

BASEMENT FINISHES & REMODELS THAT DON'T INCREASE BUILDING SIZE

APPLICATIONS WILL NOT BE PROCESSED IF ALL FORMS ARE NOT COMPLETED

Items to be submitted with application:

- a. Completed building permit application form.
- b. 2 sets of the Building Plans. The use of each room must be labeled.
- c. Completed plumbing permit application if any plumbing work is proposed.
- d. Completed heating permit application if any ventilation work is proposed (including extending duct work or installing exhaust fans).
- e. Septic Compliance Inspection
If the property is located in a shoreland district (within 1000 feet of a lake or within 300 feet of the Sunrise River) or if the work includes adding a bedroom, a septic system compliance inspection must be done. If the system was installed within the last 5 years the Certificate of Compliance is still valid. If the system was inspected within the last 3 years, the Certificate of Compliance is still valid. The system must have been designed and installed to support the additional bedroom(s). If the system is not large enough, or is failing, a septic permit application to replace or expand the septic system must be included with the Building Permit Application.

If all of the requirements of the Minnesota State Building Code and of the City of Wyoming's Ordinances have been met, a building permit will be issued.

Your building permit does not include the inspection of electrical work. A separate Request for Electrical Inspection form with the required fees must be submitted to the Board of Electricity at or before commencement of any electrical installation that is required by law to be inspected.

Gene Boyle does electrical inspections in the City of Wyoming. He can be reached at (763) 633-9148, 7:00 – 8:30 am.

***Minimum 24-hour notice for inspections.

***Permit number & address must be furnished when requesting an inspection.

***The building permit inspection card and the approved plans must be on job site at all times. If the building permit inspection card is not posted, the requested inspection will not be done.

***The job is not complete, and the space cannot be used until all of the required inspections are approved.



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BASEMENT FINISH & REMODELS

Building Codes and City Ordinances provide minimum standards for creating an environment of health and safety for all Wyoming residents.

Permits

1. A signed, completed building permit application form.
2. Two (2) copies of plans showing proposed layout and materials. Plans shall be drawn to scale and shall include the following information.
 - a. A floor plan indicating:
 - Location of lower level or basement exterior walls.
 - Location of all existing and proposed interior walls of lower level or basement.
 - Name of each existing and proposed room.
 - Location and sizes of windows and doors.
 - Wall construction materials.
 - Location of existing or proposed plumbing fixtures, including furnace and water heater.
 - Location of stairway, fireplaces, etc.
 - Location of smoke detector(s).
 - Location and size of supply and return air ducts.
 - b. A cross section plan indicating:
 - Proposed finished ceiling height.
 - Wall, floor, and ceiling finish materials.
 - Existing and proposed insulation and vapor barrier.
 - Rise, run and headroom on stair.

Required Inspections:

1. Framing/Insulation: To be made after all framing, insulation, and ductwork are in place and the rough electrical, plumbing, and heating systems are approved.
2. Final: To be made when work is complete, having final approval of any heating, electrical, or plumbing work.

24 HOUR NOTICE IS REQUIRED FOR ALL INSPECTIONS

Framing:

1. Properly sized beams and headers must be used in structural bearing conditions. Specify intended sizes of such beams and headers on plans.
2. Enclosed usable space under stairs must be protected on the underside with 1/2 - inch thick gypsum wallboard or equivalent.
3. Treated wood or decay resistant bottom plates are required where in contact with concrete floors.

Insulation:

1. Foam plastic (rigid) insulation shall be protected on the interior by not less than 1/2 inch thick gypsum board, or the foam must be of an approved type.

2. Fiberglass insulation must be covered on the interior by not less than a four (4) mil thick vapor retarder. Unfinished vapor retarders require a flame retardant type poly.

Mechanical / Plumbing:

1. Furnace rooms must be provided with outside combustion air.
2. Joints, regulators, or fittings in gas piping may not be concealed within the wall or ceiling construction.
3. Each water closet stool shall be located in a clear space not less than 30 inches in width and have a clear space in front of the water closet stool of not less than 24 inches.
4. Each bathroom shall be provided with an operable window or a powered exhaust fan which vents to the exterior.

Smoke Detectors:

Smoke detectors are required for the entire house when remodeling or finishing a basement. Smoke detectors must be in each bedroom, in corridors leading to bedrooms and on every level of the home. Smoke detectors must be hard wired with battery backup in the newly remodeled areas. Smoke detectors in existing areas may be solely battery powered. Smoke detectors should be interconnected if possible.

Windows:

Each bedroom shall be provided with an emergency escape or rescue window – (see attached handout).

Ceiling Height:

The minimum permitted ceiling height in habitable rooms (meaning finished family rooms and bedrooms) is seven (7) feet.

General Notes:

1. The reviewed plans and the Inspection Record Card shall be made available to the inspector during inspections. It shall be posted in a prominent location in the area of construction.
2. Separate permits are required when installing electrical wiring, heating equipment, or plumbing fixtures. Contact the Building Official for information regarding plumbing and heating permits. Contact Gene Boyle, the state electrical inspector at (763) 633-9148 between the hours of 7:00 A.M. and 8:30 A.M. for electrical permits and inspections.
3. Call (651) 462-4947 between the hours of 8:00 A.M. and 4:30 P.M. to arrange for building inspections. Please provide the permit number with your request.

NOTE: For specific code requirements, please contact the Building Official. Questions regarding design and cost should be referred to a professional builder or architect.



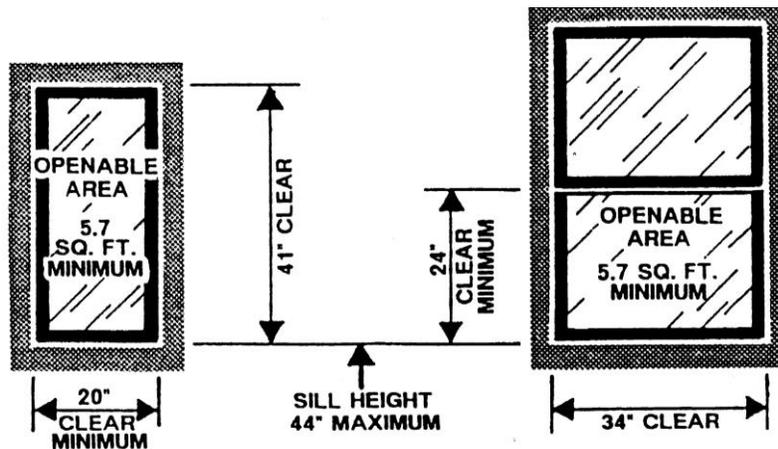
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MINIMUM SIZE FOR RESCUE ESCAPE WINDOWS FROM SLEEPING ROOMS IRC Section R310

The Minnesota State Building Codes provide minimum standards for creating an environment of health and safety for all residents.

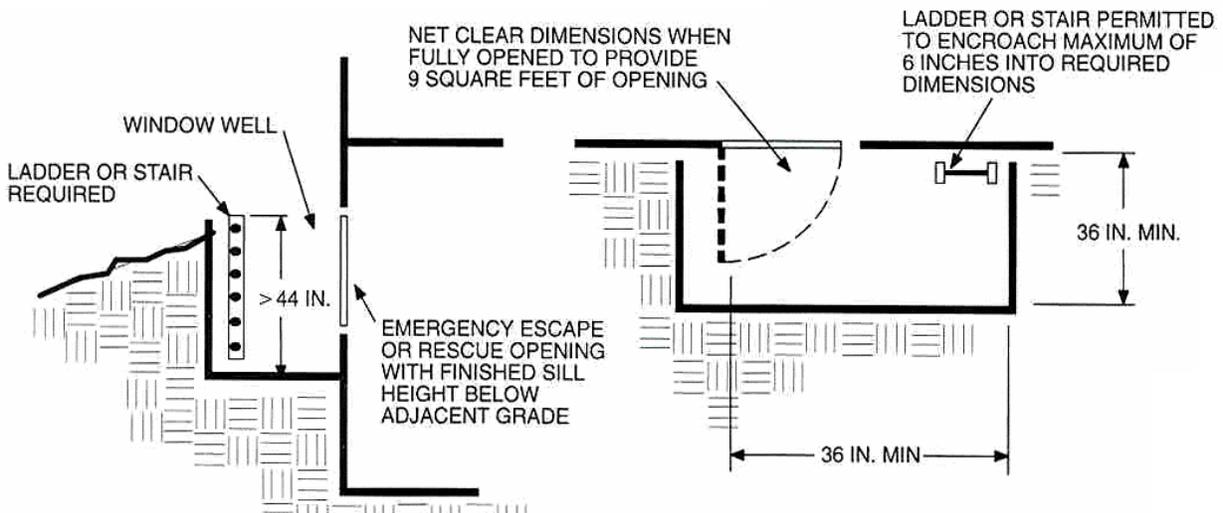
Permits required

A building permit is required for replacing or installing new windows.



Escape windows must meet all three of the following minimum sizes for clear openable area: 20 inches wide, 24 inches high, 5.7 square feet (Exception: Grade-floor openings may have a minimum net clear opening of 5.0 square feet).

Basement window well for escape rescue windows



This handout is written as a guide to common questions and problems. It is not intended nor shall it be considered a complete set of requirements.



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**Application For Building Permit
 (Finish Basements & Remodels that don't increase building size)**

**NOTE: THERE IS A PENALTY FOR CONSTRUCTION PRIOR TO ISSUANCE OF THE PERMIT.
 ALL FEES MUST BE PAID.**

Please Print

Site Address _____
address city State zip

Owner Name _____ Phone _____

Legal Description Lot _____ Block _____ Subdivision _____

Sec _____ Twp 33N Range 21W Zone _____

PIN (Tax) Number R21.

Builder/Contractor Name _____ License # _____

PLEASE PRINT

Contact Person _____

Address _____
address city State zip

Phone _____

Type of work Remodel _____ Repair _____ Finish _____

Type of Construction Wood _____ Masonry _____ Steel _____

Use of Rooms _____

Finished or Remodeled Area Size _____ x _____ = _____ sq. ft.

Valuation of completed work \$ _____ (Labor & Materials)

Desired start date ____/____/____ Estimated completion date ____/____/____

See next page

OFFICE USE ONLY

APPROVED / DISAPPROVED By: _____ Date ____/____/____
Official

Permit # _____ Date Paid ____/____/____ Check # _____



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Application For Building Permit Continued

Site address _____
address city State zip

Please identify all General Contractors and Sub-Contractors to be performing work on this permit:

General:	_____	_____	_____
	<small>name</small>	<small>phone #</small>	<small>license #</small>
Plumbing:	_____	_____	_____
	<small>name</small>	<small>phone #</small>	<small>license #</small>
Electrical:	_____	_____	_____
	<small>name</small>	<small>phone #</small>	<small>license #</small>
Carpentry:	_____	_____	
	<small>name</small>	<small>phone #</small>	
Sheetrock:	_____	_____	
	<small>name</small>	<small>phone #</small>	
Heating:	_____	_____	
	<small>name</small>	<small>phone #</small>	
Insulation:	_____	_____	
	<small>name</small>	<small>phone #</small>	

The undersigned agrees to do all work in conformance with The Minnesota State Building Code and City of Wyoming Ordinances, and herewith declares that all facts and representations on this application are true and correct.

THE UNDERSIGNED AGREES TO NOTIFY THE INSPECTIONS DEPT. WHEN READY FOR INSPECTIONS.

Signature of Applicant _____ Date ____/____/____

OFFICE USE ONLY

Permit # _____



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APPLICATION FOR PLUMBING PERMIT

Date _____ Structure Used As _____

Owner _____ Phone # _____

Site Address _____ city State zip

Legal Description Lot _____ Block _____ Subdivision _____

Sec _____ Twp 33N Range 21W Zone _____ PIN (Tax) Number R 21.

Plumbing Contractor Name _____ Phone # _____ PLEASE PRINT

Contact Person _____

Address _____

Job Description _____ Estimated Cost \$ _____

Number of each item listed below:

- Water Closet (toilet) _____ Dish Washer _____ Laundry Trays _____
Bath Tub _____ Garbage Disposal _____ Floor Drain _____
Whirlpool Tub _____ Kitchen Sink _____ Sewer Line _____
Urinal _____ Drinking Fountain _____ Water Line _____
Bidet _____ Catch Basins _____ Lawn Sprinkler _____
Lavatory (bath sink) _____ Water Softener _____ Standpipe _____
Shower _____ Sewage Ejector _____ Hose bib _____
Grease Interceptor _____ Gas piping _____ Sewage Ejector _____
Water Heater Size _____ Oil/Flammable Waste Separator _____
(Gas or electric) _____ Garage Floor Drain (Cannot discharge into septic or sewer) _____

To install gas piping you must be licensed with the City of Wyoming License # _____

The undersigned agrees to do all work in conformance with The Minnesota State Building Code and herewith declares that all facts and representations on this application are true and correct.

THE UNDERSIGNED AGREES TO NOTIFY THE INSPECTIONS DEPT. WHEN READY FOR INSPECTIONS.

Signature of Applicant _____ Date _____

This permit may be issued only to a licensed plumbing contractor or to an owner who occupies the single-family dwelling. MN Statute 326.40

OFFICE USE ONLY

Required Inspections: [] Rough-In _____ [] Final _____

APPROVED / DISAPPROVED By: _____ Date ____/____/____ Official

Permit # _____ Date Paid ____/____/____ Check # _____



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APPLICATION FOR A HEATING, VENTILATION & AIR CONDITIONING PERMIT

Date _____ Structure Used As _____

Owner _____ Phone # _____

Site Address _____ city _____ State _____ zip _____

Legal Description Lot _____ Block _____ Subdivision _____

Sec _____ Twp 33N Range 21W Zone _____ PIN (Tax) Number R 21.

Heating Contractor Name _____ Phone # _____ PLEASE PRINT

Contact Person _____

Address _____

Job Description _____ Estimated Cost \$ _____

Fuel Source _____ Oil _____ Gas (Natural or LP?) _____ Wood/Solid Fuel

Scope of work - Check all that apply

- ___ Furnace ___ Hot Water Boiler ___ Gas Piping ___ Gas Fireplace
___ Air Conditioner ___ Refrigeration ___ Gas Log ___ Man. Wood Fireplace
___ Ductwork ___ Ventilation/Exhaust ___ Log Lighter ___ Misc. Other _____

Equipment that will be installed:

Table with 8 columns: Type of equipment, Manufacturer, Model No., Fuel, Flue Dia., Input/BTU's, CFM, Tons

Air to Air Exchanger Heat / Energy (circle one) Recovery Ventilator

Table with 5 columns: Manufacturer, Model No., Defrost Deduction, Rated low capacity, Rated high capacity

The installation of a solid fuel appliance or an exhaust system of 300 CFM or more will require the submittal of a ventilation worksheet.

Provide the name of the electrical contractor doing the wiring: _____

To install gas piping you must be licensed with the City of Wyoming License # _____ GL _____

The undersigned agrees to do all work in conformance with The Minnesota State Building Code and herewith declares that all facts and representations on this application are true and correct.

THE UNDERSIGNED AGREES TO NOTIFY THE INSPECTIONS DEPARTMENT WHEN READY FOR INSPECTIONS.

Signed _____ Date: ____/____/____

OFFICE USE ONLY ORSAT Test Required ___ Yes ___ No

Required Inspections: ___ Rough-In ___ Gas Line Pressure Test ___ Final

APPROVED / DISAPPROVED By: _____ Date ____/____/____

Permit # _____ Official Date Paid ____/____/____ Check # _____