



City Of Wyoming - Department Of Building Safety  
26885 Forest Blvd, PO Box 188  
Wyoming, MN 55092  
Phone (651) 462-4947  
permits@wyomingmn.org

# NOTICE

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

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

**Residential Districts Minimum Setbacks**

	<b>A</b>	<b>R-1</b>	<b>R-2</b>	<b>R-3</b>	<b>R-4</b>	<b>R-6</b>
<b>Principal Structures</b>						
<b>Front Street Setback</b>						
Local Street	40' from ROW 73' from CL	40' from ROW 73' from CL	40' from ROW 73' from CL	30' from ROW	25' from ROW	25' from ROW
Collector Street (Does not include county roads)	40' from ROW 73' from CL	40' from ROW 73' from CL	40' from ROW 73' from CL	40' from ROW	30' from ROW	30' from ROW
Arterial Street	135' from CL	135' from CL	135' from CL	40' from ROW	40' from ROW	40' from ROW
County Roads, US & State Highways	135' from CL	135' from CL	135' from CL	135' from CL	135' from CL	135' from CL
Highway 8 Frontage	150' from ROW	150' from ROW	150' from ROW	150' from ROW	150' from ROW	150' from ROW
<b>Side Street Setbacks (corner lots)</b>						
Local Street	40' from ROW 73' from CL	40' from ROW 73' from CL	40' from ROW 73' from CL	20'	20'	15'
Collector Street (Does not include county roads)	40' from ROW 73' from CL	40' from ROW 73' from CL	40' from ROW 73' from CL	30'	25'	20'
Arterial Street	135' from CL	135' from CL	135' from CL	30'	35'	30'
County Roads, US & State Highways	135' from CL	135' from CL	135' from CL	135' from CL	135' from CL	135' from CL
Highway 8	150' from ROW	150' from ROW	150' from ROW	150' from ROW	150' from ROW	150' from ROW
Interior Side Yard Setback	40'	10'	10'	10'	10'	½ height of building
Rear Yard Setback	50'	35'	35'	35'	35'	35'
Maximum Building Height in Stories	3	3	3	3	3	3
Maximum Building Height in Feet	35'	35'	35'	35'	35'	45'
<b>Accessory Structures</b>						
Front Street Setback	Same distance as Principal Structure					
Side Street Setbacks (corner lots)	Same distance as Principal Structure					
Interior Side Yard Setback	40' farm buildings 3' non-farm buildings	3'	3'	3'	3'	3'
Rear Yard Setback	50' farm buildings 3' non-farm buildings	3'	3'	3'	3'	3'
Maximum Building Height in Stories	N/A farm buildings 3 non-farm buildings	1	1	1	1	1
Maximum Building Height in Feet	N/A farm buildings 35' non-farm buildings	25'	25'	18'	18'	18'
Parking, Driveway Setback	5'	5'	5'	5'	5'	15'
<b>No structures can be placed in easements.</b>						
Arterial Streets:	All State and County Highways, East Viking Boulevard (Anoka County to Glen Oak Drive), Kettle River Boulevard (formerly Co. Rd. 62, from East Viking Blvd. to Anoka County)					
Collector Streets:	Goodview Avenue, Pioneer Road, West Comfort Drive, Innsbrook Avenue, Heath Avenue, East Viking Blvd. (East of Glen Oak Drive), and 250th Street / Greenway Avenue (Washington County to Highway 61 / Forest Boulevard)					

	Septic Tank	Septic Drainfield	Deep Well	Shallow Well	Property Line	OHWL	Wetland
Above Ground Swimming Pool	10'	20'	N/A	N/A	See Zoning District	See Art. VI, Div. 16	20'
In-Ground Swimming Pool	10'	20'	20'	20'	See Zoning District	See Art. VI, Div. 16	20'
Deep Well	50'	50'	N/A	N/A	N/A	50'	N/A
Shallow Well	50'	100'	N/A	N/A	N/A	50'	N/A
Septic Tank	N/A	N/A	50'	50'	10'	See Art. VI, Div. 16	N/A
Septic Drainfield	N/A	N/A	50'	100'	10'	See Art. VI, Div. 16	N/A
Building	10'	20'	3' to overhang of roof	3' to overhang of roof	See Zoning District	See Art. VI, Div. 16	20'



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## REQUIREMENTS FOR ADDITIONS & PORCHES

APPLICATIONS WILL NOT BE PROCESSED IF ALL FORMS ARE NOT COMPLETED.

Items to be submitted with application:

1. Completed **Additions & Porches Building Permit Application** with all of the subcontractors listed
2. Two complete sets of **building plans** - See attached "Single Family Dwelling Minimum Plan Requirements"
3. Completed plumbing permit application (If applicable) - **Plumbing must be done by a licensed plumber**
4. Completed HVAC permit application (If applicable) - **Gas piping installers must be licensed with the City**
5. 2 copies of a **Certificate of Survey** or Site Plan - Showing the location of the house, addition, driveway, roads, septic system, well (if applicable), and any other buildings with dimensions and setbacks. If property stakes cannot be located, a new Certificate of Survey is required. The survey must be signed by a State of Minnesota Registered Land Surveyor.
6. Copy of **builder's state license** - Homeowners working on their own home are exempt
7. **Energy Code Requirements** - Insulation and Fenestration requirements written on plans or separate sheets verifying compliance with Minnesota Energy code section R402 climate zone 6 including but not limited to:
  1. Energy code Table R402.1.1, including R-values, fenestration U-factors and SHGC's
  2. R-value computation methods utilized per R402.1.2
  3. U-factor alternative, if used, per R402.1.3
  4. Total UA alternative, if used, per R402.1.4Calculations are not required for screen porches that will not have insulation or heating equipment.
8. Additions or alterations to existing buildings shall **require dwelling unit mechanical ventilation** that meets the requirements of Section N1104. Ventilation shall be one of three types:
  1. Exhaust according to Section N1104.3.1
  2. Balanced and HRV/ERV system or other methods according to Section N1104.3.3
  3. Exception for dwelling units constructed prior to 4/15/00 and did not require a mechanical ventilation system
9. Truss designs and specifications are to be furnished at the framing inspection - Complicated roof designs may need to be submitted with the building permit application.
10. **Septic Compliance Inspection** - If the property is located in a shoreland district (within 1,000 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 in the last 5 years or inspected in the last 3 years, its Certificate of Compliance is still valid. The system must have been designed and installed to support the additional bedroom(s). If the system is found to be failing or is not large enough, a septic permit application must be included with this permit application.

At this time, the addition must be staked out so a site inspection can be done. If all the requirements of the Minnesota State Building Code and the City of Wyoming's ordinances have been met, a building permit will be issued.

### GENERAL NOTES

1. Minimum 24-hour notice for inspections.
2. The building permit inspection card, approved plans, site plan and the roof truss specifications must be on the jobsite at all times. If the building permit inspection card is not posted, the requested inspection will not be done.
3. Address must be furnished when requesting an inspection.
4. The job is not complete, and the space cannot be occupied, until all of the required inspections are approved.
5. **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. Electrical inspections in the City of Wyoming are done by Mark Thoma. He can be reached at 320-309-9483, 7:00 – 8:30 am.

**A CERTIFICATE OF OCCUPANCY IS REQUIRED FOR ALL BUILDINGS**



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# SINGLE FAMILY DWELLING MINIMUM PLAN REQUIREMENTS

**COMPLETE AND ACCURATE INFORMATION PROVIDED ON PLANS SUBMITTED WILL EXPEDITE THE PLAN REVIEW PROCESS**

### Foundation Plan:

1. Completely and accurately dimensioned
2. Footing Sizes & Locations:
  - A. Exterior and interior bearing walls
  - B. Post pad footings
  - C. Porch and/or deck footings
  - D. Fireplace Footings
3. Foundation Design:
  - A. Block Foundations - Over 5 courses shall have foundation reinforcement detailed, specify block size
  - B. Poured Foundations - Identify wall thickness, reinforcement size and location
  - C. Wood Foundations - Provide complete design
4. Brick ledge & stepped wall locations
5. Door & window location and sizes with U-values
6. Interior wall construction materials
7. Identify cantilevers & method of construction
8. Identify plate material
9. Size of all beams and headers
10. Crawlspace location, access size & wall insulation
11. Floor joist size, spacing & direction
12. Identify room use & location
13. Identify unexcavated areas
14. Location of:
  - A. Furnace
  - B. Water Heater
  - C. Sump Location
  - D. Smoke Detector(s)
  - E. Floor Drain(s)
  - F. Bathroom Fixtures
15. Location & size of stairs with direction of travel

### Floor Plan(s):

1. Completely & accurately dimensioned
2. Door & window location and sizes with U-Values
3. Brick facing locations
4. Identify cantilevers & method of construction
5. Size all beams & headers
6. Floor joist size, spacing & direction
7. Identify room use by name
8. Location & size of stairs with direction of travel
9. Attic access size & location
10. Location of fireplace, type of fireplace & hearth size
11. Deck and/or porch construction:
  - A. Floor joist size & spacing
  - B. Beam & header sizes
  - C. Rafter/truss size & spacing

12. Handrail and/or guardrail - height & spacing of stiles or rails
13. Rafter/truss size & spacing
14. Location of furnace flue
15. Smoke detector locations
16. Location of plumbing fixtures & exhaust fans
17. Identify garage firewall construction & self-closing fire door

### Cross Section(s):

Provide necessary cross sections which shall be sufficiently detailed to indicate the location, nature & extent of the work proposed.

1. Footing size - Exterior & interior bearing walls
2. Driantile location
3. Foundation type, size, number of courses of block, reinforcing size & location
4. Anchor bolt size & spacing
5. Identify sill plat material
6. Identify floor joist size & spacing
7. Identify flooring material
8. Label foundation insulation & R-value
9. Basement floor thickness
10. Stairway - Rise, run & headroom
11. Exterior Wall Construction:
  - A. Vapor retarder, air barrier, wind wash barrier locations
  - B. Roof sheathing
  - C. Insulation
  - D. Stud size & spacing
  - E. Siding
  - F. Interior finish
  - G. Sill plate material type
12. Ceiling Heights
13. Roof Construction:
  - A. Ceiling finish
  - B. Roof sheathing
  - C. Attic insulation
  - D. Roof ventilation
  - E. Rafter/truss size & spacing
  - F. Ceiling vapor retarder
  - G. Ice build-up protection
  - H. Soffits/fascia material
14. Soffit ventilation

### Elevations:

1. Roof pitch
2. Roof ventilation
3. Roof overhang dimension
4. Siding material (Exterior finish materials)
5. Location of doors & windows
6. Locations of decks and/or porches
7. Location & height of chimney & chimney saddles
8. Location of house number (4" minimum height)



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# ADDITIONS & PORCHES BUILDING PERMIT APPLICATION

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

Site Address \_\_\_\_\_  
Address City State Zip

Owner Name \_\_\_\_\_ Phone \_\_\_\_\_

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Section \_\_\_\_\_ Township 33N Range 21W Zone \_\_\_\_\_  
 Subdivision \_\_\_\_\_ PIN Number R21.

Builder/Contractor: Name \_\_\_\_\_ License # \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Architect/Engineer: Name \_\_\_\_\_ Phone \_\_\_\_\_

Type Of Work:  New  Alter  Repair

Type Of Construction:  Wood  Masonry  Steel

Building Use \_\_\_\_\_

Building Size \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ ft<sup>2</sup> Total Floor Area \_\_\_\_\_

Valuation of Completed Work \$ \_\_\_\_\_ (includes labor & materials)

Desired Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Estimated Completion Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

See next page

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OFFICE USE ONLY

APPROVED / DISAPPROVED By \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Permit # \_\_\_\_\_  Plans in BS&A



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# ADDITIONS & PORCHES BUILDING PERMIT APPLICATION CONTINUED

Site Address \_\_\_\_\_  
Address

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

General: \_\_\_\_\_  
Name Phone License #

Roofing: \_\_\_\_\_  
Name Phone License #

Plumbing: \_\_\_\_\_  
Name Phone License #

Electrical: \_\_\_\_\_  
Name Phone License #

Masonry: \_\_\_\_\_  
Name Phone

Carpentry: \_\_\_\_\_  
Name Phone

Sheetrock: \_\_\_\_\_  
Name Phone

Heating: \_\_\_\_\_  
Name Phone

Insulation: \_\_\_\_\_  
Name Phone

The undersigned agrees to do all work in conformance with City Ordinances and herewith declares that all facts and representation on this application are true and correct.

The undersigned agrees to notify the inspections department when ready for inspections.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

OFFICE USE ONLY

Permit # \_\_\_\_\_



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**PLUMBING PERMIT APPLICATION**

Date \_\_\_\_\_ Structure Used As \_\_\_\_\_

Owner \_\_\_\_\_ Phone # \_\_\_\_\_

Site Address \_\_\_\_\_  
Address City State Zip

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Section \_\_\_\_\_ Township 33N Range 21W Zone \_\_\_\_\_  
 Subdivision \_\_\_\_\_ PIN Number R21.

Plumbing Contractor: Name \_\_\_\_\_ License # \_\_\_\_\_

Homeowner

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Job Description \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_

**Number of each item listed below:**

- |                                 |                                     |                                       |
|---------------------------------|-------------------------------------|---------------------------------------|
| Water Closet (Toilet) _____     | Dishwasher _____                    | 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 _____        | Backflow Preventer _____            | Garage Floor Drain _____              |
| Water Heater (List size) _____  | Oil/Flammable Waste Separator _____ | Cannot discharge into septic or sewer |
| Please Circle - Gas or Electric |                                     |                                       |

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.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

This permit may be issued only to a licensed plumbing contractor or to an owner who occupies the single-family dwelling - MN Statute 326B.46

**OFFICE USE ONLY**

**Required Inspections:**  Rough-In \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  Final \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

APPROVED / DISAPPROVED By \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Permit # \_\_\_\_\_



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## HEATING, VENTILATION & AIR CONDITIONING PERMIT APPLICATION

Date \_\_\_\_\_ Structure Used As \_\_\_\_\_

Owner \_\_\_\_\_ Phone # \_\_\_\_\_

Site Address \_\_\_\_\_  
Address City State Zip

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Section \_\_\_\_\_ Township 33N Range 21W Zone \_\_\_\_\_

Subdivision \_\_\_\_\_ PIN Number R21.

Heating Contractor: Name \_\_\_\_\_ License # \_\_\_\_\_

Homeowner

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Job Description \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_

Fuel Source:  Oil  Natural Gas  LP Gas  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  Other: \_\_\_\_\_

Equipment that will be installed:

Type of equipment	Manufacturer	Model No.	Fuel	Flue Dia.	Input/BTU's	CFM	Tons

Air To Air Exchanger: Heat or Energy Recovery Ventilator (please circle)

Manufacturer	Model No.	Defrost Deduction	Rated low capacity	Rated high capacity
		%	CFM	CFM

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 # \_\_\_\_\_

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.**

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

This permit may be issued only to a licensed heating contractor or to an owner who occupies the single-family dwelling - MN Statute 326B.46

OFFICE USE ONLY

ORSAT Test Required:  Yes  No

Required Inspections:  Rough-In \_\_\_/\_\_\_/\_\_\_  Gas Line Pressure Test \_\_\_/\_\_\_/\_\_\_  Final \_\_\_/\_\_\_/\_\_\_

APPROVED / DISAPPROVED By \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

Permit # \_\_\_\_\_