



City Of Wyoming - Department Of Building Safety
26885 Forest Blvd., PO Box 188
Wyoming, MN 55092
Phone (651) 462-4947 Fax (651) 462-0576

DEMOLITION REQUIREMENTS

The City of Wyoming building code and ordinances provide minimum standards for creating an environment of health and safety for all Wyoming residents.

Permits

- Obtain a demolition permit before commencing any demolition of structures.

Utility Disconnects

- Check with all utility companies to disconnect services for gas, electric, telephone and cable, etc.
- Call Gopher State One Call at (1-(800) 252-1166 prior to digging.
- Any water well on the property must be capped and sealed per Minnesota Department of Health regulations, Chapter 4725. A copy of the well and boring sealing record must be submitted.
- All septic systems on the property must be properly abandoned per Chapter 7080.0176. An SSTS Abandonment Reporting Form must be submitted.
- City sewer and water connections must be inspected by the City of Wyoming Public Works Department, (651) 462-0580

Site Work

- Remove all debris including foundation walls, footings, and basement floor.
- Fill in and level site and restore grade to match adjoining contours.
- An erosion control fence must be installed between the site and the street, adjacent waterways, and other properties. All fences must be maintained until such time that natural vegetation has been established.

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 (Demolition)

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 R 21.

Demo. Contractor Name _____ License # _____
PLEASE PRINT

Contact Person _____

Address _____
address city State zip

Phone _____

Septic Abandonment Contractor _____

Well Sealing Contractor _____

Type of Construction Wood _____ Masonry _____ Steel _____

Former Use of Building _____

Building size _____ x _____ = _____ sq. ft. Total floor area _____

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

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 ____/____/____

OFFICE USE ONLY

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

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