

Date Received: _____

PERMIT NO: _____

**APPLICATION FOR BUILDING PERMIT
WINDOW/DOOR REPLACEMENT
CITY OF KASSON, MINNESOTA**

Applicant: _____	Phone No.: _____
Address: _____	Proposed Use: _____
Contractor: _____	Phone No: _____
State License No: _____	
Building Site Location/New Address: _____	

**THE ATTACHED ITEMS ARE CONDITIONS
FOR PERMIT ISSUANCE FOR WINDOW/DOOR
REPLACEMENT.**

STRICT COMPLIANCE IS MANDATORY.

Call CMS for information and inspections at 507-282-8206

Jay Kruger
CMS Building Official

CALL CMS FOR FRAMING AND FINAL INSPECTIONS 282-8206.

I hereby declare that I am the Owner, or authorized agent of the owner of the above described property and I agree to construct the building or use herein described in accordance with the regulations and ordinances that govern said improvement within the City of Kasson and that the foregoing information contained on this permit is a true and correct statement of my intentions.

Date: _____ Signed by Applicant: _____

Please Print Name: _____

=====

APPROVED BY: _____ DATE: _____

Total Amount Due: \$ 50.00 _____

BUILDING PERMIT APPLICANT: PROPERTY OWNER

I, _____ (print name) understand that the State of Minnesota requires that all residential building contractors, remodelers and roofers obtain a state license unless they qualify for a specific exemption from the licensing requirements. This license requirement applies to owners of residential real estate who build or improve such property for purposes of speculation or resale.

By signing this document, I attest to the fact that I am improving this house for my own use and am not building or improving this house for the purpose of reselling it. I hereby claim to be exempt from the state licensing requirements because I am not in the business of building or remodeling on speculation or for resale and that the house for which I am applying for this permit, located at _____ is the first residential structure I have built or improved in the past 24 months. I also acknowledge that because I do not have a state license, I forfeit any mechanic's lien rights to which I may otherwise have been entitled under Minn. Stat. §514.01.

Furthermore, I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this house and I understand that some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting, remodeling, and/or roofing activity is a misdemeanor under Minn. Stat. §326B.082, subd.16 and can also result in a fine of up to \$10,000. I further state that I understand that the filing of a false statement with the City of Kasson may also result in criminal prosecution and/or civil penalties pursuant to applicable city/township ordinances and/or state statutes.

I have also been informed and acknowledge that by listing myself as the contractor for this project, I alone will be responsible to the City of Kasson for compliance with all applicable building codes and city/township ordinances in connection with the work being performed on this property.

Name (signature)

Date

For questions or information on contractor licensing, or to check the licensing status and enforcement history of a particular contractor, call the Minnesota Department of Labor and Industry, Construction Codes and Licensing Division, at (651) 284-5069. The Web site is: www.doli.state.mn.us/contractor



1700 North Broadway • Suite 128
Rochester, MN 55906
507-282-8206 • FAX 281-0391

THE FOLLOWING ITEMS ARE CONDITIONS FOR PERMIT ISSUANCE

STRICT COMPLIANCE IS MANDATORY

WINDOW REPLACEMENT:

1. Window(s) shall be installed and flashed in accordance with the manufacturer's written installation instructions. R612.1
2. Fenestration U-factor shall not exceed 0.32. Chapter 1322 Table R402.1.1
3. Written instructions shall be provided for each window and shall be on the job site at time of inspection. R612.1
4. Smoke alarms required in all areas leading to sleeping rooms and in each sleeping room. Smoke alarms to be interconnected with building wiring and shall be equipped with a battery backup. R314.3.1
5. Carbon monoxide alarms shall be required in all single family homes and multi-family apartment units. General location requirements: within ten (10) feet of each sleeping room. MN Stat.299F.50

DOOR REPLACEMENT:

1. Door(s) shall be installed and flashed in accordance with the manufacturer's written installation instructions.
2. Fenestration U factor shall not exceed 1.2 for un-insulated metal, 0.6 for insulated metal and 0.5 for wood doors. Table R303.1.3(2)
3. Written instructions shall be provided for each door and shall be on the job site at the time of inspection.
4. Smoke alarms required in all areas leading to sleeping rooms and in each sleeping room. Smoke alarms to be interconnected with building wiring and shall be equipped with a battery backup. R314.3.1
5. Carbon monoxide alarms shall be required in all single family homes and multi-family apartment units. General location requirements: within ten (10) feet of each sleeping room. MN Stat.299F.50

Jay Kruger
Building Official

CALL CMS FOR FRAMING & FINAL INSPECTION
507-282-8206 • 800-940-2547

PERMIT AND INSPECTION RECORD

Site Address _____ Nature of Work _____

Use of Building _____ Permit No. _____

Contractor _____ Owner _____

Contractor License No. _____ Date Issued _____

	INSPECTOR	DATE
Footing		
Poured Wall		
Backfill		
ROUGH-INS	INSPECTOR	DATE
Plumbing - Below Ground		
Radon		
U.G./Infloor Heat		
Plumbing - Above Ground		
Electrical		
Heating		
Ventilation		
Framing		
Insulation (installation)		
Fireplace (installation)		
FINALS	INSPECTOR	DATE
Plumbing		
Gas Line		
Heating/Ventilation		
Electrical		
Building		

CALL FOR ALL INSPECTIONS
CONSTRUCTION MANAGEMENT SERVICES
(507) 282-8206