

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: _____	How Many Windows _____ Doors _____
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: \$ 100.00** \_\_\_\_\_

**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](http://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 AND/OR DOOR REPLACEMENT:

1. Window(s) and door(s) shall be installed and flashed in accordance with the manufacturer's written installation instructions. R612.1
2. Window fenestration U-factor shall not exceed 0.32. Chapter 1322 Table R402.1.1
3. Door 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)
4. Written instructions shall be provided for each window and door and shall be on the job site at time of inspection. R612.1
5. Single and multiple station smoke alarms shall be installed:
  - a. In each sleeping room.
  - b. Outside of each separate sleeping area in the immediate vicinity of the bedrooms.
  - c. On each additional story of the dwelling, including basements, but not including crawl spaces and uninhabitable attics. In dwellings or dwelling units with split-levels and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level. MSBC1309/R314.3
6. 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 MSBC1309/R315

Where a fuel burning appliance is located within a bedroom or it's attached bathroom, a carbon monoxide alarm shall be installed within the bedroom.

SMOKE ALARMS AND CARBON MONOXIDE ALARMS CAN BE BATTERY OPERATED UNITS

Jay Kruger  
Building Official

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

## KASSON RE-INSPECTION FEES

The intent is to re-coop costs incurred for unnecessary re-inspections.

The contractor or owner will be given one (1) verbal warning. After the warning is issued, they will be put on a re-inspection list. Once on the list, each additional "did not pass" inspection will require a fee of \$60.00 to be paid to the City of Kasson prior to scheduling a re-inspection.

When an inspection does not pass but can be re-inspected at the next required inspection, a re-inspection fee will not be required. Should the correction not be completed and an additional trip is required, a re-inspection fee would be required.

The inspector in the field will inform the office when an inspection did not pass. If it is determined a fee is due, the inspector will inform the contractor/owner. CMS will inform the City via fax when a re-inspection fee is due. When the fee is paid, the City will call CMS. CMS will then be allowed to re-schedule.

Exempt situation: When a final grade cannot be completed due to winter weather. A temporary Certificate of Occupancy will be issued. When CMS is notified the correction is complete, we would schedule when in Kasson to final out the project.

# 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**