

Residential New Home

Permit Application and Plan Review Submittal

Building Site Address: _____

Applicant/Business Name: _____

Development Name: _____

Lot: _____ Block: _____

Building codes currently in effect for Woodbury, MN

2020 MN State Residential Code
2020 MN Energy Code
2020 MN Mechanical and Fuel Gas Code
2015 MN Plumbing Code



8301 Valley Creek Road, Woodbury, MN 55125-3330
building@woodburymn.gov · woodburymn.gov
651-714-3543 · TDD 651-714-3568

Required Materials for Residential Permit Applications

The following items must be submitted before the issuance of a building permit. Complete and accurate information will expedite the plan review process.

- | | <u>Included</u> |
|--|--------------------------|
| 1. Complete digital signed Residential New Home Permit Application . | <input type="checkbox"/> |
| 2. Complete digital (.pdf) copies of all construction plans, truss specs, etc. emailed to building@woodburymn.gov . Additional submittal information may be required as determined by the building inspector.
<u>Residential Building Permit Minimum Plan Requirements</u>
Contractor is responsible for providing copy of approved plans on site for review. | <input type="checkbox"/> |
| 3. Complete digital (.pdf) Supplement to New Residential Construction Application . (Page 4)) | <input type="checkbox"/> |
| 4. Complete digital (.pdf) New Construction Energy Code Compliance Certificate . (Page 5) | <input type="checkbox"/> |
| 5. Digital (.pdf) signed certificate of survey.
<u>Residential Building Permit Survey Requirements</u> | <input type="checkbox"/> |
| <ul style="list-style-type: none">• Provide a copy of septic permit application to Washington County. Rural lots only. | |

Application for Residential Permit

Site Address _____

Applicant _____ **Contact Name** _____

Address City/State/Zip _____

Cell _____ Email _____

Owner _____ **Contact name** _____

Address _____ **City/State/Zip** _____

Cell _____ Email _____

General Contractor _____ **Contact name** _____

Address _____ **City/State/Zip** _____

Cell _____ Email _____

License Number _____

HVAC Contractor _____ **Contact name** _____

Address _____ **City/State/Zip** _____

Cell _____ Email _____

License Number _____

Plumbing Contractor _____ **Contact name** _____

Address _____ **City/State/Zip** _____

Cell _____ Email _____

License Number _____

Electrical Contractor _____ **Contact name** _____

Address _____ **City/State/Zip** _____

Cell _____ Email _____

License number _____

If Applicable:

Fire Sprinkler Contractor _____ **Contact name** _____

Address _____ **City/State/Zip** _____

Cell _____ Email _____

License number _____

Applicant Signature: _____ **Date:** _____

Issuance of a permit and inspections conducted do not constitute a guarantee or warranty from the city. The applicant hereby agrees to do all work in accordance with the ordinances of the City of Woodbury, State Building Code and the requirements of the Building Inspections Division.

Supplement to New Residential Construction Application

This information is required for each new residential dwelling

Building Site Address _____

Site Superintendent Name _____

Phone number _____ Email _____

Single Dwelling Multiple Dwelling Value: _____

Square Footage

Basement _____ Deck _____

First floor _____ Entry/open porch _____

Second floor _____ Screen porch _____

Garage _____ Three-season porch _____

Finished basement _____ Stone/brick veneer _____

Storage _____

Counts

No. of gas fireplaces _____ No. of bathrooms _____ No. of rough-in bathrooms _____

Method of fire protection of floors: _____

Example: Gypsum or wood structural panel membrane, sprinkler system, type of system, etc.

Total floor area: Square feet of all floors and basement, excluding garage _____

Fire sprinkler system, if applicable: Value of all sprinkler work \$ _____

New Construction Energy Code Compliance Certificate

Per R401.3 Certificate. A building certificate shall be posted on or in the electrical distribution panel.

Date Certificate Posted



Mailing Address of the Dwelling or Dwelling Unit	City
Name of Residential Contractor	MN License Number

THERMAL ENVELOPE RADON CONTROL SYSTEM

Insulation Location	Total R-Value of all Types of Insulation	Type: Check All That Apply								RADON CONTROL SYSTEM	
		Non or Not Applicable	Fiberglass, Blown	Fiberglass, Batts	Foam, Closed Cell	Foam Open Cell	Mineral Fiberboard	Rigid, Extruded Polystyrene	Rigid, Isocyanurate	Passive (No Fan)	Active (With fan and monometer or other system monitoring device)
Below Entire Slab										Location (or future location) of Fan:	
Foundation Wall										Other Please Describe Here	
Perimeter of Slab on Grade											
Rim Joist (1st Floor)											
Rim Joist (2nd Floor+)											
Wall											
Ceiling, flat											
Ceiling, vaulted											
Bay Windows or cantilevered areas											
Floors over unconditioned area											
Describe other insulated areas											

Building envelope air tightness: (ACH) Duct system air tightness: (cfm/100sf)

Windows & Doors	Heating or Cooling Ducts Outside Conditioned Spaces
Average U-Factor (excludes skylights and one door) U:	Not applicable, all ducts located in conditioned space
Solar Heat Gain Coefficient (SHGC):	R-value

MECHANICAL SYSTEMS					Make-up Air Select a Type	
Appliances	Heating System	Domestic Water Heater	Cooling System			
Fuel Type				Not required per mech. code		
Manufacturer				Passive		
Model				Powered		
Rating or Size	Input in BTUS:	Capacity in Gallons:	Output in Tons:	Interlocked with exhaust device. Describe:		
Efficiency	AFUE or HSPF%		SEER /EER	Other, describe:		
Residential Load Calculation	Heating Loss	Heating Gain	Cooling Load	Location of duct or system:		
				Cfm's		

MECHANICAL VENTILATION SYSTEM					Combustion Air Select a Type	
Describe any additional or combined heating or cooling systems if installed: (e.g. two furnaces or air source heat pump with gas back-up furnace):					Not required per mech. code	
Select Type					Passive	
Heat Recover Ventilator (HRV) Capacity in cfm's:	Low:	High:			Other, describe:	
Energy Recover Ventilator (ERV) Capacity in cfm's:	Low:	High:			Location of duct or system:	
Balanced Ventilation capacity in cfm's:					Cfm's	
Location of fan(s), describe:					" round duct OR	
Capacity continuous ventilation rate in cfm's:					" metal duct	
Total ventilation (intermittent + continuous) rate in cfm's:						