



BASEMENT

Permit Application

Office Use Only

Notes: Scan

Permit Total:
\$ _____

City of Elk River

Fire and Building Safety Division

13065 Orono Parkway NW • Elk River, MN 55330

763.635.1060 • E-mail: ERFD.FABS@ElkRiverMN.gov

Date: _____

Permit #: _____

Site Address: _____ **PID #** _____

Property Type: Single Family Multi-family Twin home

Construction Type: New Addition Remodel Repair Alteration Other _____

The Applicant Is: Owner Contractor Other _____

Property Owner:

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Contractor:

Business Name _____ License/Bond _____

Address _____ City _____ State _____ Zip _____

Office Phone _____ Cell _____

Email _____

Payment Options:

Call me for credit card payment (If different than above, please note: Phone: _____)

Send Check (Please make checks payable to the City of Elk River)

Pay in person via Credit Card, Check, or Cash

Receipt of Permit Options:

Email permit (If different than above, please note: Email : _____)

Pick up in person (All permits with plans needs to be picked up)

• PLEASE COMPLETE OTHER SIDE OF APPLICATION •

Office Use Only

Approved by: _____ Date: _____ Hard Card or Soft Card - Soft card reference permit # _____

Called or L/M Date: _____ Int. _____

Last Modified 04/2018

Detailed description of work:

* Please note: Separate permits are required for electrical, plumbing, and/or mechanical work.

Total Job Valuation \$ _____

----- **This is an application for a permit – It is not valid until processed** -----

I hereby apply for a Building Permit, and I acknowledge that the information above is complete and accurate. I understand this is not a permit and work is not to start without a permit.

I understand and hereby agree that the work for which the permit issued shall be performed according to; (1) the conditions of the permit; (2) the approved plans and specifications; (3) the applicable city approvals, ordinances, and codes; and, (4) the state building/mechanical codes and regulations.

I understand that the permit will expire, and become null and void if work is not started within 180 days, or if work is suspended or abandoned for a period of 180 days any time after work has commenced; and, that I am responsible for ensuring that all required inspections are requested in conformance with the state building code.

Signature of Contractor/Responsible Party

Print Name

Date

Signature of Property Owner

Print Name

Date

BASEMENT FINISH

This handout is written only as a guide; it is not intended, nor shall it be considered a complete set of requirements.

Required Permits:

1. A building permit to complete the structural work
2. Electrical permit
3. Plumbing permit if plumbing work is performed
4. HVAC permit if heating work is performed.

Plan Requirements: Two copies of plans indicating use and dimensions of each room, locations of exterior and interior walls, doors and windows, smoke detectors, and furnace and water heaters.

General Code Requirements:

1. Bottom plates of proposed walls shall be treated.
2. Enclosed closets under stairs must be entirely finished with gypsum board.
3. A smoke detector must be installed on each level of the home. If there are bedrooms, the smoke detectors shall also be installed in the bedrooms. CO detectors are required within ten feet of all sleeping areas.
4. Each bedroom shall be provided with an escape window having:
 - a minimum net clear openable area of 5.7 sq. ft.
 - a minimum net clear opening height dimension of 24"
 - a minimum net clear opening width dimension of 20"
 - a finished sill height of not more than 44"
5. Each water closet may not have a flush volume of more than 1.6 gallons and shall be located in a clear space not less than 30" in width and have a clear space in front of the water closet of not less than 24".
6. Dissimilar materials must not be attached directly to each other, i.e., PVC must not be glued to ABS waste and vent.
7. An approved anti-scald (thermostatic or pressure-balancing type) faucet must be installed in new shower or shower/bath installations.
8. Each bathroom shall be provided with an openable window or powered exhaust fan venting to the outside.
9. Furnace and water heaters shall have an unobstructed working space of not less than 30" in front and shall be provided with outside combustion air. Furnaces may not be accessed through, or located in a bedroom.
10. No concealed flared or union gas fittings are allowed.
11. An equal number of return air and supply air shall be attained.
12. Building framing cavities shall not be used as ducts or plenums.
13. All supplies and returns shall originate from the main trunk line.



BASEMENT PLUMBING

Permit Application

Office Use Only

Notes: Scan

Permit Total:
\$ _____

City of Elk River

Fire and Building Safety Division

13065 Orono Parkway NW • Elk River, MN 55330
763.635.1060 • E-mail: ERFD.FABS@ElkRiverMN.gov

Date: _____

Permit #: _____

Site Address: _____ **PID #** _____

Property Type: Single Family Multi-family Twin home

Construction Type: New Addition Remodel Repair Alteration Other _____

The Applicant Is: Owner Contractor Other _____

Property Owner:

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Contractor:

Business Name _____ License/Bond _____

Address _____ City _____ State _____ Zip _____

Office Phone _____ Cell _____

Email _____

Payment Options:

Call me for credit card payment (If different than above, please note: Phone: _____)

Send Check (Please make checks payable to the City of Elk River)

Pay in person via Credit Card, Check, or Cash

Receipt of Permit Options:

Email permit (If different than above, please note: Email : _____)

Pick up in person (All permits with plans needs to be picked up)

• PLEASE COMPLETE OTHER SIDE OF APPLICATION •

Office Use Only

Approved by: _____ Date: _____ Hard Card or Soft Card - Soft card reference permit # _____

Called or L/M Date: _____ Int. _____



BASEMENT MECHANICAL

Permit Application

Office Use Only

Notes: Scan

Permit Total:
\$ _____

City of Elk River

Fire and Building Safety Division

13065 Orono Parkway NW • Elk River, MN 55330
763.635.1060 • E-mail: ERFD.FABS@ElkRiverMN.gov

Date: _____

Permit #: _____

Site Address: _____ **PID #** _____

Property Type: Single Family Multi-family Twin home

Construction Type: New Addition Remodel Repair Alteration Other _____

The Applicant Is: Owner Contractor Other _____

Property Owner:

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

Contractor:

Business Name _____ License/Bond _____

Address _____ City _____ State _____ Zip _____

Office Phone _____ Cell _____

Email _____

Payment Options:

Call me for credit card payment (If different than above, please note: Phone: _____)

Send Check (Please make checks payable to the City of Elk River)

Pay in person via Credit Card, Check, or Cash

Receipt of Permit Options:

Email permit (If different than above, please note: Email : _____)

Pick up in person (All permits with plans needs to be picked up)

• PLEASE COMPLETE OTHER SIDE OF APPLICATION •

Office Use Only

Approved by: _____ Date: _____ Hard Card or Soft Card - Soft card reference permit # _____

Called or L/M Date: _____ Int. _____

Detailed description of work:

Check all boxes that apply:

- | | | | |
|-----------------------------------------------|-----------------------------------------|----------------------------------------------|----------------------------------------|
| <input type="checkbox"/> A/C | <input type="checkbox"/> Class II Hood | <input type="checkbox"/> Fireplace | <input type="checkbox"/> Radiant Heat |
| <input type="checkbox"/> Boiler | <input type="checkbox"/> Combustion Air | <input type="checkbox"/> Furnace | <input type="checkbox"/> Refrigeration |
| <input type="checkbox"/> Air to Air Exchanger | <input type="checkbox"/> Dryer Venting | <input type="checkbox"/> Heat Pump Appliance | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Class 1 Hood | <input type="checkbox"/> Duct Work | <input type="checkbox"/> Pool Heater | <input type="checkbox"/> Unit Heater |
| <input type="checkbox"/> Other _____ | | | |

Fill all the appropriate boxes below:

Make	Model #	Heat Loss/Gain	Fuel	Flue Diameter	Input (BTU)	CFM	Tons	Hp

Gas Piping

Please check all boxes that apply:

- | | | | |
|---------------------------------|------------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Boiler | <input type="checkbox"/> Fireplace | <input type="checkbox"/> Gas Main | <input type="checkbox"/> Unit Heater |
| <input type="checkbox"/> Dryer | <input type="checkbox"/> Furnace | <input type="checkbox"/> Range | <input type="checkbox"/> Other _____ |

* If gas piping will be done by others, please indicate: Name _____

Total Job Valuation \$ _____

Permit Fee \$ 15
 Surcharge \$ 1
Total Due \$ 16

----- **This is an application for a permit – It is not valid until processed** -----

I hereby apply for a Basement Mechanical permit, and I acknowledge that the information above is complete and accurate. I understand this is not a permit and work is not to start without a permit.

I understand and hereby agree that the work for which the permit issued shall be performed according to; (1) the conditions of the permit; (2) the approved plans and specifications; (3) the applicable city approvals, ordinances, and codes; and, (4) the state building/mechanical codes and regulations.

I understand that the permit will expire, and become null and void if work is not started within 180 days, or if work is suspended or abandoned for a period of 180 days any time after work has commenced; and, that I am responsible for ensuring that all required inspections are requested in conformance with the state building code.

Signature of Contractor/Responsible Party

Print Name

Date

Signature of Property Owner

Print Name

Date