

Detached Garage  
- Shed over 1200 sq ft.

# Residential Building Permit Application

**BUILDING INSPECTIONS**  
Midwest Inspection Services  
310 1st Avenue SE  
Mapleton, ND 58059  
Phone: 701-532-1078  
Fax: 701-532-1608

Please email completed applications to: [midwestinspectionsservicesnd@gmail.com](mailto:midwestinspectionsservicesnd@gmail.com)  
Incomplete applications will cause delays in the routing/review and permitting process.

Project Title*:	Office use only:
Address:	
Project Value:	
Project Description:	
Owner:	Contact Person:
Address:	Phone: <span style="float: right;">Fax:</span> E-mail:
Designer:	Contact Person:
Address:	Phone: <span style="float: right;">Fax:</span> E-mail:
General Contractor:	Contact Person:
Address:	Phone: <span style="float: right;">Fax:</span> E-mail:
ND Contractor License No.	
Foundation Contractor:	Mechanical Contractor:
Phone: E-Mail: ND Contractor License No.	Phone: E-Mail: ND Contractor License No.
Excavator:	Yard Grading Contractor:
Phone:	Phone:
Plumbing Contractor:	Electrical Contractor:
Phone:	Phone:

Complete back side.

**TYPE OF IMPROVEMENT:**

New Construction  Addition  Remodel  Demolition  Move  Repair  Miscellaneous  Temporary

**PERMIT FOR:**

Single Family Dwelling  Two Family Dwelling (Separate Permit for each Unit)  Townhouse (      Units)  
 Accessory Building  Deck  Residing  Lower Level Finish  
 Other (Please Explain:      )

**BUILDING/STRUCTURE SIZE:**

Width  Ft. Depth  Ft. Height  Ft. No. of Stories  Basement Finished  Yes  No  
Basement Floor Area  SF  Number of Bedrooms  
Main Floor Area  SF  Number of Bedrooms  
Second Floor Area  SF  Number of Bedrooms  
Third Floor Area  SF  Number of Bedrooms  
Garage Floor Area  SF

# of Units	HVAC EQUIPMENT	TON'S/BTU's

**BUILDING LOCATION ON SITE:**

Property Zoning Designation      Property Area      SF  
North Property Setback Distance      Ft.  Front  Side  Rear  Adjacent to Public Way  
East Property Setback Distance      Ft.  Front  Side  Rear  Adjacent to Public Way  
South Property Setback Distance      Ft.  Front  Side  Rear  Adjacent to Public Way  
West Property Setback Distance      Ft.  Front  Side  Rear  Adjacent to Public Way

**REQUIREMENTS FOR CONSTRUCTION IN FLOODPLAIN:**

Is the Building Located in the Special Floodplain Hazard area?  Yes  No (If yes complete the following)  
Base Flood Elevation      Ft. Flood Protection Elevation      Ft. Letter of Map Revision Issued  Yes  No  
Acknowledgement Form Submitted  Yes  No

**For Office Use Only**

**Septic Permit Required:**

Yes  No

**Planning and Zoning Approval:**

P.U.D.  Yes  No      Conditional Use  Yes  No      Overlay District  Yes  No  
Date Approved

*I hereby acknowledge that this application is not a Building Permit, nor does it authorize the start of construction. If you do not wish to electronically sign please print and sign application before submittal*

Signature of Applicant

Date

**AFFIDAVIT**

STATE OF MINNESOTA )  
 ) SS.  
COUNTY OF \_\_\_\_\_ )

ADDRESS OF SITE \_\_\_\_\_

Date \_\_\_\_\_

We, the undersigned, being first duly sworn, on oath depose and state based on personal knowledge as follows, to-wit:

1. That we are all the fee owners of the said real estate, or if all of the owners have not personally signed this affidavit below, then a valid power of attorney, conservator or person acting with proper authority as demonstrated by an attached court order for each said person has signed below on their behalf.
2. That we are in approval of the permit application submitted on (date) \_\_\_\_\_ to the City of \_\_\_\_\_ for changes, alterations, new building and/or additions to the buildings/land at:  
Address: \_\_\_\_\_  
City, State, Zip \_\_\_\_\_
3. That we are knowledgeable of the permit application design and /or changes to the said property and approve of such work being done on/to the property.
4. That all information contained in the attached permit application submitted herewith is true and correct.

**OWNERS**

(All owners or those with proper authority as described above)

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

Owner to complete and return to:

NOTARY PUBLIC SIGNATURE \_\_\_\_\_

City of Ada  
P.O. Box 32  
Ada, MN 56510  
Phone: (218)784-5520  
Fax: (218)784-2711

NOTARY PUBLIC PRINTED NAME \_\_\_\_\_

Permit Number: \_\_\_\_\_

Parcel Number: \_\_\_\_\_

# Property Owner Waiver

## Minnesota State Contractor Licensing Requirements

*The purpose of this form is to have property owners acknowledge their responsibilities to the Minnesota State Building Code, to Zoning Ordinances, and to other applicable rules and regulations when they are acting as general contractor in building projects.*

I 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. By signing this waiver, I attest to the fact that I am building or improving my property by myself. I claim to be exempt from the State License requirements because I am not in the business of building on speculation or for resale and this is the first residential structure that I have built or improved in the past 24 months.

I 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 Minnesota State Statute 514.01.

I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this property. 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 Minnesota State Statute 326.92, subdivision 1, and that I forfeit my rights to reimbursement from the Contractor's Recovery Fund in the event that any contractors that I hire are unlicensed.

I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the State Building Code and/or jurisdictional Ordinance in connection with the work performed on this property.

\_\_\_\_\_  
*Signature or Property Owner*

\_\_\_\_\_  
*Printed Name of Property Owner*

\_\_\_\_\_  
*Project Address*

\_\_\_\_\_  
*Date*

**PLEASE RETURN THIS SIGNED WAIVER WITH THE BUILDING PERMIT APPLICATION.**

To determine whether a particular contractor is required to be licensed, or to check on the licensing status of an individual contractor, call the Minnesota Department of Commerce, Enforcement Division at 651/296-2594, or toll-free at 1-800/657-3602.



# Guideline for Building Accessory Use Structures

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This handout is a guide only and does not contain all the requirements of the Township Building Code or City Ordinance

**Building Permits** are required for all accessory use structures over 120 square feet in area. Examples of accessory use structures are, but not limited to, detached garages, tool and storage sheds, playhouses and gazebos.

**Building Permit Fees** are based on the valuation of the construction project; this includes the materials and labor. If you will be doing the work yourself an estimate of labor cost shall be determined and included with the cost of materials.

## General Building Permit Application Requirements:

- ❖ Name, address and telephone number of person making application.
- ❖ Name, address and telephone number of person owning the property.
- ❖ Name, address and telephone number of Contractor, architect/designer and all subcontractors.
- ❖ Job cost
- ❖ Job description must indicate the entire scope of work to be completed (levels to be finished or unfinished, etc.)

## Plans Required:

- ❖ Provide a total of 2 sets of bound and clearly marked plans with the following contents:
- ❖ Residential Building Permit Application.
- ❖ Approval letters if required by area developers.
- ❖ One complete set of engineered truss specs and layout details.
- ❖ (2) Copies of site plan to include lot & block description, all easements and must show all structures as they sit on the lot and the actual dimensions from property lines to the structures.
- ❖ (2) Copies construction drawings to include: elevations, dimensioned floor plans for all levels, section detail of wall, roof, foundation (size of footings, walls & rebar size & spacing) & materials being used. **(All construction drawings must be to a minimum 1/8" scale and 11x17 sized paper.)**
- ❖ Professional engineered designs may be required if the plan review indicates structure or parts thereof exceed the requirements of the Building Code (IRC & IBC).
- ❖ If engineered designs are required, they must have the original wet stamp signature of the design professional.

## REQUIRED INSPECTIONS

1. **Site/Footing** – to approve accessory structure location and footing prior to pouring concrete.
2. **Foundation wall** – to approve rebar placement prior to pouring concrete.
3. **Framing** – after completion of structural frame, sheathing and roof to the building frame, and prior to covering the structural frame. All Electrical, HVAC, and Plumbing shall be installed and inspected before calling for framing inspection.
4. **Final** – when addition is completed and prior to occupying.

It shall be the responsibility of the permit holder to notify the Building Department when work is ready to be inspected. No work shall commence until the inspection is complete and approved.

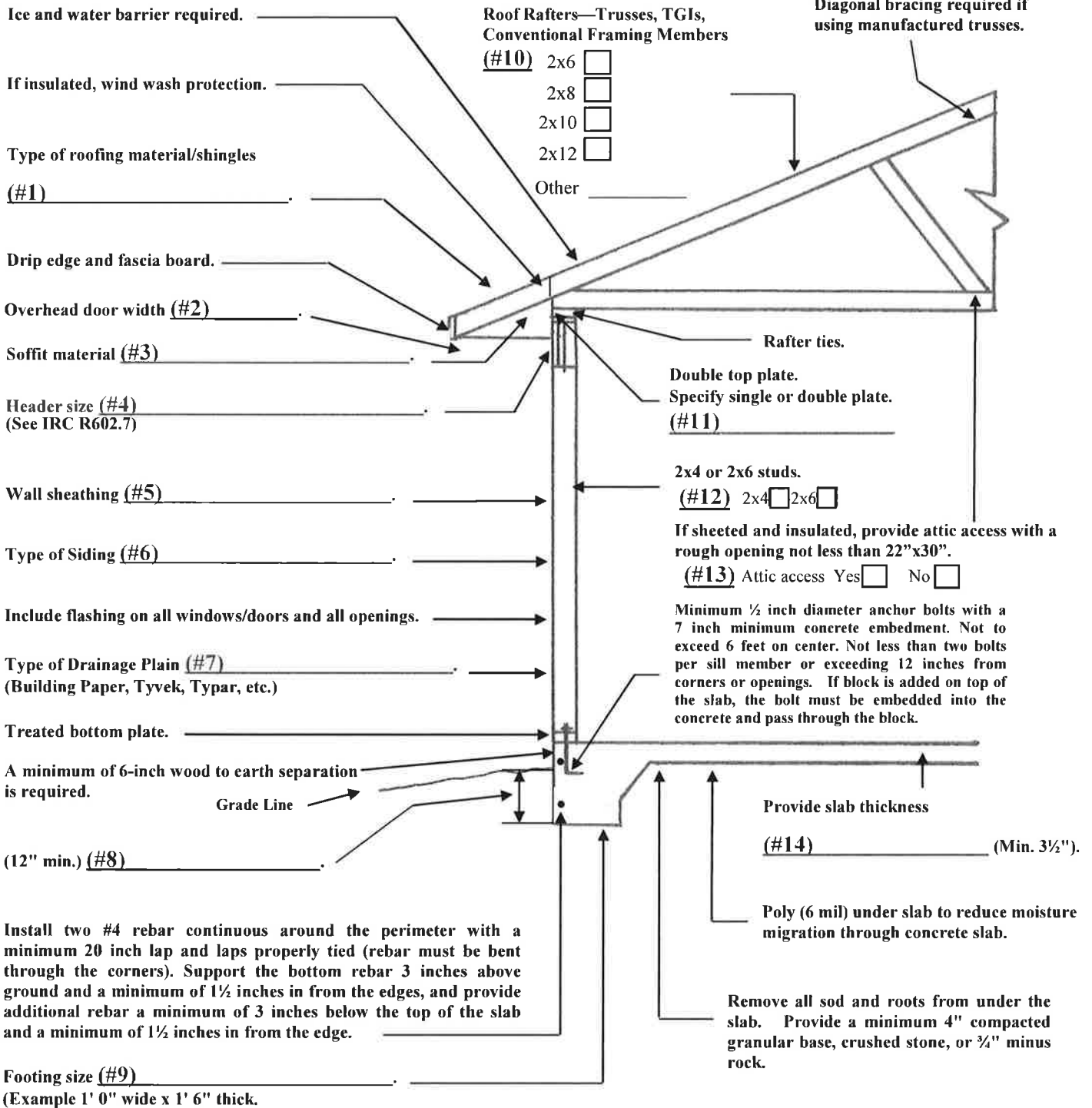
Allow 1-2 business days for review of your plans; you will be contacted when your plans have been approved. Any omissions in the application and/or plans will result in a delay of the approval.

## **BUILDING CONSTRUCTION GUIDELINES**

- 1. Setbacks** – Check township ordinance for setback requirements in designated zones. For accessory use structures only, the rear yard shall be considered that area between the back part of the dwelling and the rear property line. Consideration should be taken in placement of the accessory structure if future expansion of the dwelling into the rear yard is a possibility.
- 2. Building Size** – Please refer to the attached Zoning ordinance for maximum area/size for an accessory use structure. The maximum height for an accessory use structure is 15 feet from grade to the highest part of the roof. Larger accessory use structures may be conditionally permitted in some residential zoning districts.
- 3. Foundation** – The foundation may be a concrete slab with turned-down footings or decay resistant wood. Concrete having a 3500 pound strength and air entrainment should be specified. Concrete slabs must be a minimum thickness of 3 ½ inches. The perimeter of the slab shall be 12 inches thick for an 8 inch to 12 inch width. Within the thickened perimeter of the slab, two #4 rebar should be installed to be continuous around the perimeter. If the slab rests on fill, it should be reinforced with #4 rebar 2 feet on center or 6inch X 6 inch welded wire mesh. All Accessory structures must be anchored into the ground a minimum of 12”.
- 4. Walls** - Bottom plate shall be of at least the same width as the wall studs. Wall studs shall be a minimum 2 X 4 and space maximum 24 inches on center, with three wall studs at each exterior corner. Wall studs shall be capped with double top plates overlapped at corners and end joints offset at least 24 inches. Structural wall sheathing is recommended. Headers must have at least one trimmer stud under each end. Headers over 5 feet shall have a minimum of two trimmer studs under each end. Headers for openings greater than 8 feet shall be approved by the Building Department. (Consider pre-engineered laminated veneer lumbers for openings greater than 6 feet.)
- 5. Roofs** – Manufactured roof trusses are highly recommended. If hand framed rafters are used, the size of the rafter is determined by the span and spacing of the rafter. Lumber used in construction of rafters must be at least 2 X 4 in dimension. Roof sheathing must be of approved span rated sheathing.

**All residential construction shall meet the minimum requirements of the Township Ordinances.**

## Single Family Residential Accessory Structure on a Floating Slab



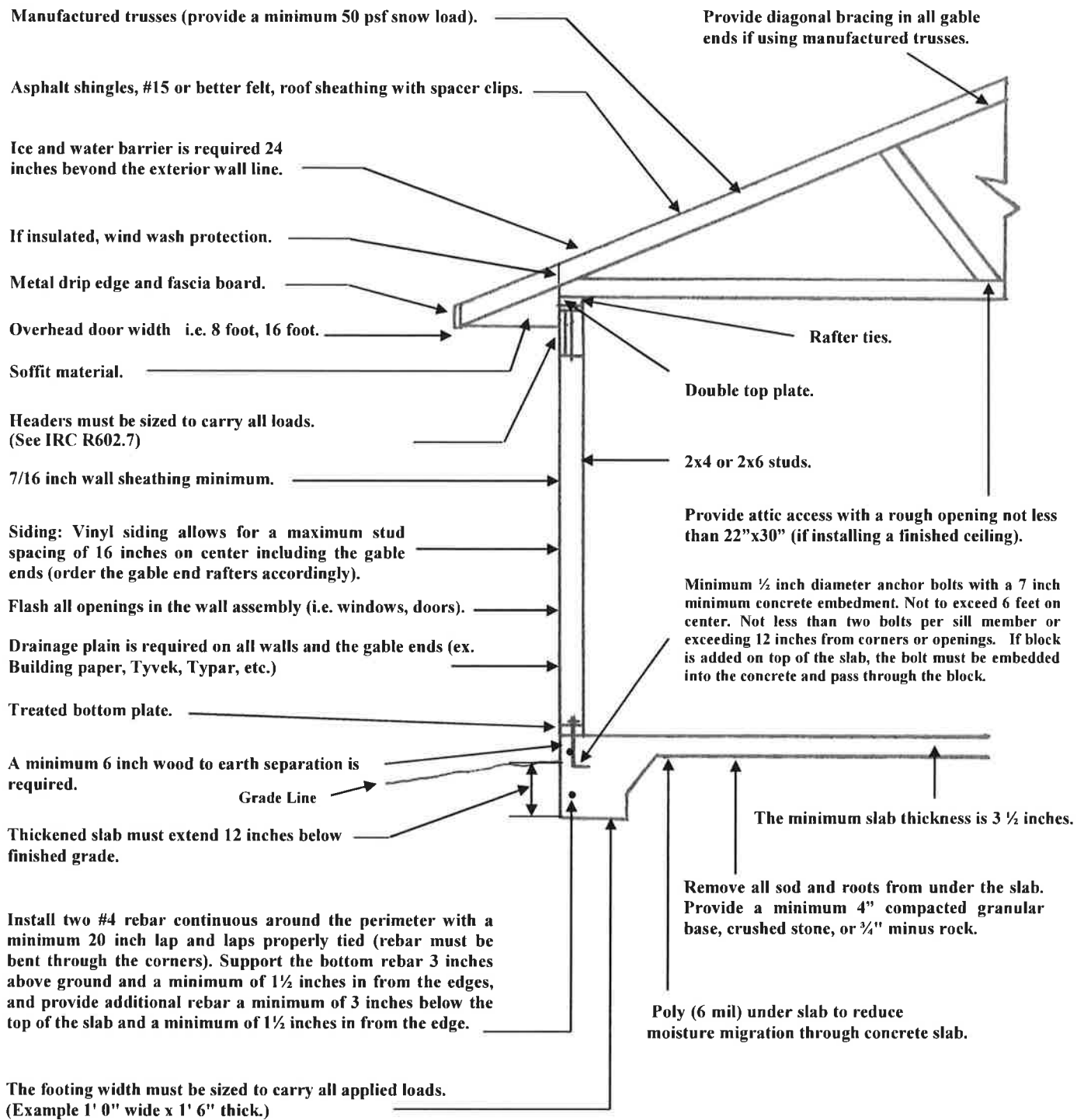
I agree to follow the building systems provided in this document.

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Before submitting permit application, provide information as requested on numbered lines (1-14).*

# Single Family Residential Accessory Structure on a Floating Slab – Example



*Please provide information on the reverse side of this sheet as it applies to your project.*



The following sheets is only provided as reference to assist you in drafting a sight plan for your project.

