



# CITY OF CORCORAN

## New Home Construction Permit Submittal Requirements

Incomplete applications **will not** be forwarded to the Building Inspections Department for plan review.  
**THIS CHECKLIST MUST ACCOMPANY THE NEW HOME PERMIT APPLICATION.**

- \_\_\_\_\_ One (1) completed Building Permit application form (This includes mechanical and plumbing.)
- \_\_\_\_\_ Two (2) sets of the proposed building plans showing design, floor plans, elevations, cross sections, materials, and scale. (One full-size set and one 11"x17" set required.)
- \_\_\_\_\_ Two (2) copies of a Certificate of Survey indicating lot dimensions and the location and setbacks of buildings, driveways, septic systems, wells, etc. (at least one 11"x17" copy required)
- \_\_\_\_\_ Combustion makeup air worksheet (Attached)
- \_\_\_\_\_ Energy Code Compliance Certificate (Attached)
- \_\_\_\_\_ One (1) copy of soil test report and septic design.
- \_\_\_\_\_ Septic permit to be filled out and submitted to Hennepin County Department of Public Health.  
  
(\*Please note: The permit application will be reviewed but will not be issued until a septic permit is approved by the County.)
- \_\_\_\_\_ Electrical permit to be filled out and submitted to the Department of Labor and Industry.
- \_\_\_\_\_ Driveway permits are required for access to all public roads (\*new driveways only\*)
  - Application must be made to Hennepin County to access a County road
  - Application must be made to the City of Corcoran for access to a City road
- \_\_\_\_\_ Grading and Fill permit (if applicable)  
\*Sediment and erosion control must be in place prior to any site work

## **Additional Features Checklist** (\*CHECK ITEMS THAT WILL BE INCLUDED IN THE INITIAL CONSTRUCTION OF THIS HOME\*)

All items checked below may need to be installed and completed before a Certificate of Occupancy can be issued for this new home. All items checked must be added or shown in the submitted building plans.

- Finished Basement
- Deck
- 3-Season Porch
- Gas Fireplace Quantity: \_\_\_\_\_
- Masonry/Wood Fireplace Quantity: \_\_\_\_\_
- In-Floor Heat
- Geothermal System
- Retaining Wall - maximum height = \_\_\_\_\_  
(retaining walls are measured from the bottom of the footing to the top of the wall)
- Other: \_\_\_\_\_

\*If any of these items are added to the plan after the building permit has been issued, an additional permit will be required.

### **Application Procedure for Septic Permit**

It is the responsibility of the home owner or builder to submit a completed Septic Application, \*a copy of the septic design, \*copy of the lot survey and septic permit fees to the Hennepin County Human Services and Public Health Department before commencing any activity for a sewage treatment system. Once the City has been notified of your approval the City can begin processing your building permit. You should allow approx. 12 - 14 days for the completion of the application process.

\*\* It is the duty of the applicant to notify the Health Authority of the date/time the inspection is needed at least 24 hours before requested. For more information regarding septic issues, please contact Steve Bray at 612-543-5200.

### **Application Procedure for Electric Permit**

It is the responsibility of the home owner or builder to submit a completed Electric Application to the Department of Labor and Industry. \*\* It is the duty of the applicant to notify the Electrical Inspector of the date/time the inspection is needed at least 24 hours before requested. For more information regarding electric issues, please contact Paul Hipsag 763-241-2102.

*This handout is intended only as a guide and is based in part on the 2015 Minnesota State Building Code, Corcoran City ordinances, and good building practice. While every attempt has been made to ensure the correctness of this handout, no guarantees are made to its accuracy or completeness. Responsibility for compliance with applicable codes and ordinances falls on the owner and/or contractor. For specific questions regarding code requirements, refer to the applicable codes or contact the Building Department.*

# COMBUSTION AIR/MAKE-UP AIR WORKSHEET

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Site Address: \_\_\_\_\_

Total floor Area (including basement): \_\_\_\_\_

Size of Room with Combustion Equipment: \_\_\_\_\_

Average Ceiling Height \_\_\_\_\_ Number of Bedrooms \_\_\_\_\_

**\*Check all that apply**

**Year Home was Constructed**

Pre-1994	1994-2003	2004 and After	New – YB _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Combustion Equipment (Existing & New)**

	Atmospheric Vent	Fan Assist/ Power Vent	Direct Vent	Electric
Water Heater Input: _____ BTU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnace/Boiler Input: _____ BTU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnace/Boiler Input: _____ BTU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fireplace**

Gas Direct Vent	Gas Log Insert	Wood Burning Solid Fuel	Factory Wood Burning Solid Fuel Closed Combustion Air
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Ventilation System/Per Energy Code, Not Mechanical Code**

Exhaust Only	Balanced (HRV/ERV)	None
<input type="checkbox"/> Fan 1 CFM: _____ <input type="checkbox"/> Fan 2 CFM: _____	<input type="checkbox"/>	<input type="checkbox"/>

**Exhaust Systems**

	Yes	CFM: _____	No	CFM: _____
Kitchen	<input type="checkbox"/>		<input type="checkbox"/>	
Central Vacuum	<input type="checkbox"/>		<input type="checkbox"/>	
Bath Fan	<input type="checkbox"/>		<input type="checkbox"/>	
Other	<input type="checkbox"/>		<input type="checkbox"/>	

# New Construction Energy Code Compliance Certificate

Per N1101.8 Building Certificate. A building certificate shall be posted in a permanently visible location inside the building. The certificate shall be completed by the builder and shall list information and values of component listed in Table N1101.8.

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

THERMAL ENVELOPE							RADON SYSTEM		
House area _____ Sq. Ft.	Total R-Value of all Types of Insulation	Type: Check All That Apply						<input type="checkbox"/>	Passive (No Fan)
		Non or Not Applicable	Fiberglass, Blown	Fiberglass, Batts	Foam, Closed Cell	Foam Open Cell	Mineral Fiberboard	Rigid, Extruded Polystyrene	Rigid, Isocyanurate
Number of bedrooms _____									Other Please Describe Here

Insulation Location	Total R-Value of all Types of Insulation	Non or Not Applicable	Fiberglass, Blown	Fiberglass, Batts	Foam, Closed Cell	Foam Open Cell	Mineral Fiberboard	Rigid, Extruded Polystyrene	Rigid, Isocyanurate	Other Please Describe Here
Below Entire Slab										
Foundation Wall										Location: <input type="checkbox"/> interior <input type="checkbox"/> exterior or <input type="checkbox"/> integral
Perimeter of Slab on Grade										
Rim Joist (Foundation)										Location: <input type="checkbox"/> interior <input type="checkbox"/> exterior or <input type="checkbox"/> integral
Rim Joist (1 <sup>st</sup> Floor+) Wall										Location: <input type="checkbox"/> interior <input type="checkbox"/> exterior or <input type="checkbox"/> integral
Ceiling, flat										
Ceiling, vaulted										
Bay Windows or cantilevered areas										
Bonus room over garage										
Describe other insulated areas										

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 <i>Select a Type</i>	
Appliances	Heating System	Domestic Water Heater	Cooling System	<input type="checkbox"/>	Not required per mech. code
Fuel Type				<input type="checkbox"/>	Passive
Manufacturer				<input type="checkbox"/>	Powered
Model				<input type="checkbox"/>	Interlocked with exhaust device. Describe:
Rating or Size	Input in BTUS:	Capacity in Gallons:	Output in Tons:	<input type="checkbox"/>	Other, describe:
Structure's Calculated	Heat Loss:		Heat Gain	Location of duct or system:	
Efficiency	AFUE or HSPF%		SEER:		Cfm's
			Calculated cooling load:	<input type="checkbox"/>	" round duct OR
				<input type="checkbox"/>	" metal duct

<b>Mechanical Ventilation System</b>					
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):					
<b>Select Type</b>					
<input type="checkbox"/>	Heat Recover Ventilator (HRV) Capacity in cfm's:	Low:	High:	<input type="checkbox"/>	Not required per mech. code
<input type="checkbox"/>	Energy Recover Ventilator (ERV) Capacity in cfm's:	Low:	High:	<input type="checkbox"/>	Passive
<input type="checkbox"/>	Continuous exhausting fan(s) rated capacity in cfm's:			<input type="checkbox"/>	Other, describe:
	Location of fan(s), describe:				Location of duct or system:
	Capacity continuous ventilation rate in cfm's:				Cfm's
	Total ventilation (intermittent + continuous) rate in cfm's:			<input type="checkbox"/>	" round duct OR
				<input type="checkbox"/>	" metal duct