
RESIDENTIAL DOOR & WINDOW REPLACEMENT

- This handout is intended only as a guide. It shall not be considered a complete set of requirements.
- Materials and installation must comply with the current Minnesota State Building Code and the manufacturers' installation specifications for each product.
- Residential window and door replacement permits are issued over-the-counter at the municipality office. Permits are not required to replace broken glass in an existing window sash.
- This handout is **VALID** for single-family homes, duplexes, and townhomes. (Does NOT include condominiums, apartment complexes, and commercial properties.)
- **NOT VALID** for repairs, replacement, removal, or installation of any structural members.
- Each address requires a separate permit.
- Contractor must be EPA Certified if the home was constructed before 1978.
- Replacement windows/doors must be the **same size**. In sleeping rooms, the unobstructed open area of the window, when fully open, may **NOT** be reduced.
- If window size is being changed or if framing is being added or removed, a separate building permit is required. When replacing a window opening with a bay window, a building permit is required.

PERMIT CARD (throughout the project) shall be:

POSTED prior to start of work - **VISIBLE** from street or driveway - **ACCESSIBLE** to the inspector.

INSPECTION REQUIREMENTS:

Inspections **MUST** be scheduled during office hours **AT LEAST** one business day prior to inspection. If a specific date and time is required, additional notice may be needed. Failure to cancel a scheduled inspection may result in a reinspection fee.

- **Office Hours:** Monday - Friday • 8:00 a.m. - 4:30 p.m.
- **Phone:** (952) 442-7520 or (888) 446-1801

Inspections:

- **Someone 18 years or older must be present at the time of the inspection.**
- **See Project Checklist in this handout for additional requirements.**
- **This work requires smoke alarms and carbon monoxide detectors to be properly installed.**
- **Final:** BEFORE the installation of any interior trim. For window inserts, an inspection is required after the work is complete. Take photographs of original sleeping room windows, and identify each window's original location.

NOTICE: Construction or work for which a permit is required shall be subject to inspection by the Building Official, and such **construction or work shall remain accessible and exposed for inspection purposes until approved.** It is the responsibility of the permit applicant to be in attendance on site and provide access to the Building Official for all required inspections. If work is concealed and/or work is not complete at time of inspection, an additional inspection is required and a **reinspection fee may apply.**

Note: The State of Minnesota requires all residential building contractors, remodelers, roofers, plumbers, and electricians to obtain a state license, unless they qualify for a specific exemption. Any person claiming an exemption must provide a copy of a Certificate of Exemption from the Department of Labor & Industry to the Municipality before a permit will be issued.

Note: To determine contractor requirements, or to check the licensing status of a contractor, please call the Minnesota Department of Labor & Industry at 651-284-5065 or toll free 1-800-342-5354.

Note: For specific code requirements, contact the Building Inspection Department at 952-442-7520 or 888-446-1801 or e-mail: infoMN@safebuilt.com.

PROJECT CHECKLIST:

The following is a guideline to assist in compliance with the requirements of the MN State Building Code.

- The home address must be visible from the street.

- If replacing a window in a sleeping room, refer to our *Emergency Escape & Rescue Openings* handout.
- Smoke and carbon monoxide detectors are required. Refer to our *Requirements for Smoke and Carbon Monoxide Detectors* handout (half-sheet) for code requirements.
- Flashing shall be installed at the head and sides of exterior window and door openings and shall extend to the surface of the exterior wall finish or to the water-resistive barrier for subsequent drainage.
 - ASTM certification sheet is required if no drip cap flashing is installed (ASTM E331).
 - Fenestration installation instructions must be provided for each window/door.
- Energy efficiency requirements:
 - U-Factor for windows must not be greater than 0.32.
 - U-Factor for skylights must not be greater than 0.55.
 - Windows must have U-Factor sticker in place at the time of inspection.

REQUIRED SAFETY GLAZING LOCATIONS		
R308.4	Location	Exceptions
.1	Glazing in fixed or operable panels of swinging, sliding, or bi-fold doors	1. Openings that would prevent passage of a 3 in. sphere 2. Decorative glass
.2	Glazing where any part of glass is within 24 in. arc of the operable door in closed position & <60 in. above floor or standing surface	1. Decorative glass 2. When protected by intervening wall or barrier 3. Glass perpendicular to door on latch side 4. When door only serves closet ≤3 ft. deep (reach-in closet) 5. Glass adjacent to fixed side of patio doors
.3	Walk-through hazard >9 sq. ft. & lowest edge <18 in. from walking surface & upper edge >36 in. above walking surface & ≤3 ft. horizontal from walking surface	1. Decorative glass 2. When protected by min 1½ in. high horizontal rail, 34-38 in. above walking surface. Rail must resist 50 lb. force per linear foot w/o contacting glass 3. Outboard panes ≥25 ft. above grade, roof, or other surface
.4	Guards, railings, and guard infill components	none
.5	Walls, enclosures, or fences containing or facing hot tubs, spas, whirlpools, saunas, steam rooms, bath tubs, showers, swimming pools where the bottom exposed edge of the glazing is <60" measured vertically above any standing or walking surface	1. Glazing > 60 in., measured horizontally, in a straight line, from the water's edge of a bathtub, hot tub, spa, whirlpool, or swimming pool
.6	Glass adjacent to stairways, landings & ramps within 36 in. horizontally of walking surface & <60 in. above walking surface	1. When protected by min 1½ in. high horizontal rail 34-38 in. above walking surface w/rail above to resist 50 lb. force w/o contacting glass
.7		2. When >18 in. horizontally from a railing meeting req's of an open-stair guard
.8		3. When solid vertical surfaces installed 34-36 in. above walking surface & top of solid surface resists same loads as a guard
.7	Glass within 60 in. horizontally of bottom tread of stair in any direction when glass <60 in. above nose of tread	Same as exceptions 2 & 3 to item .6 above.

Certification of Final Testing on Gas Line and Fittings

(This form must be completed and provided to the inspector at final inspection of all newly installed gas lines and/or fittings.)

PERMIT NUMBER: _____ Date of Work Completion: _____

Site Address: _____

Municipality: _____

Company/Installer Name: _____

Describe the Scope of Work Performed

Be specific – include what work was performed, the appliance being serviced, what new components were installed (i.e. gas line, fittings, shut-off valves), and the type of material (i.e. black iron, copper, corrugated stainless steel, plastic). Attach additional sheet(s) if needed:

Type of Approved Test Performed: _____

I certify that on _____^(Date) the above-stated approved test was completed in accordance with Section 406 of the MN Fuel Gas Code, that all work was completed prior to the test, and that no leaks were detected upon completion of the test.

(Signature of Certifying Individual)

(Certification Date)

(Printed Name)

Certification of Testing of Fuel Gas-Fired Heating Equipment

(This form must be completed and provided to the inspector at final inspection of all gas-fired furnaces and boilers.)

PERMIT NUMBER: _____ Date of Test Completion: _____

Site Address: _____

Municipality: _____

Company/Installer Name: _____

ORSAT Test Results						
Atmospheric			Induced Draft/Fan-Assisted		Power Type	
Item	Code Req.	Actual	Code Req.	Actual	Code Req.	Actual
Efficiency	≥ 75 %		≥ 75 %		≥ 80 %	
CO level	≤ .04%		≤ .04%		≤ .04%	
Stack Temp	≤ 480° F		≤ 480° F		≤ 480° F + ambient OR	
					≤ 125° F in excess of fluid Temp + ambient	
CO2 level	Between 6-9%		Between 6-9%		Between 6-9%	
Oxygen level	Between 4-10%		Between 4-10%		Between 3-10%	

I certify that on _____^(Date) the above-stated approved test was completed in accordance with Section 1346.5900 of the MN Fuel Gas Code, that all work was completed prior to the test and that the fuel gas-fired equipment meets the performance standards for the type of equipment.

- A copy of the test results along with the installer's name and test date must be affixed to the appliance.

(Signature of Certifying Individual)

(Certification Date)

(Printed Name)