



14669 Fitzgerald Blvd N  
 Hugo, MN 55038  
 PHN: (651) 762-6300  
 FAX: (651) 762-6344  
 www.ci.hugo.mn.us

# Window/Door Replacement Permit

|                    |  |
|--------------------|--|
| Property Type:     | <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Townhome <input type="checkbox"/> Accessory Structure (shed/detached garage/pole building) <input type="checkbox"/> MFD Home<br><input type="checkbox"/> Commercial Building <input type="checkbox"/> IBC Residential  |
| Construction Type: | <input type="checkbox"/> Replacement <b>NOTE: New or altered openings require a "Construction Permit" with applicable documentation.</b>   |
| Job Site Address:  | Street Number <input style="width: 50px;" type="text"/> Street Name <input style="width: 200px;" type="text"/> Unit <input style="width: 50px;" type="text"/><br>Parcel ID <input style="width: 80px;" type="text"/> Lot <input style="width: 30px;" type="text"/> Block <input style="width: 30px;" type="text"/><br>Subdivision <input style="width: 500px;" type="text"/>   |
| Applicant Type:    | <input type="checkbox"/> Contractor <input type="checkbox"/> Owner – (Property Owner Waiver Form Required)           Verify Ownership at <a href="https://mn-washington.manatron.com/">https://mn-washington.manatron.com/</a>   |
| Contractor Detail: | Company Name <input style="width: 500px;" type="text"/><br>Contact First Name <input style="width: 150px;" type="text"/> Mobile/Text # <input style="width: 80px;" type="text"/><br>Contact Last Name <input style="width: 150px;" type="text"/> Office Phone # <input style="width: 80px;" type="text"/><br>Street Number <input style="width: 50px;" type="text"/> Street Name <input style="width: 200px;" type="text"/> Unit <input style="width: 50px;" type="text"/><br>City <input style="width: 150px;" type="text"/> State <input style="width: 30px;" type="text"/> Zip <input style="width: 50px;" type="text"/><br>Contact Email <input style="width: 200px;" type="text"/> License Number <input style="width: 80px;" type="text"/> |
| Owner Detail:      | Owner First Name <input style="width: 150px;" type="text"/> Mobile/Text # <input style="width: 80px;" type="text"/><br>Owner Last Name <input style="width: 150px;" type="text"/> Other Phone # <input style="width: 80px;" type="text"/><br>Email <input style="width: 200px;" type="text"/><br>Street Number <input style="width: 50px;" type="text"/> Street Name <input style="width: 200px;" type="text"/> Unit <input style="width: 50px;" type="text"/><br>City <input style="width: 150px;" type="text"/> State <input style="width: 30px;" type="text"/> Zip <input style="width: 50px;" type="text"/>  |
| Project Summary:   | <input style="width: 500px; height: 20px;" type="text"/>   |

**\*\*\*\*\* RESIDENTIAL - COMPLETE THIS SECTION \*\*\*\*\***

|                         |  |
|-------------------------|--|
| Window/Door Quantities: | Window-Full Frame <input style="width: 50px;" type="text"/> Window-Inserts <input style="width: 50px;" type="text"/> Doors <input style="width: 50px;" type="text"/> Skylights <input style="width: 50px;" type="text"/> |
| Maximum U-Factors:      | Windows = .32   Doors = .32   Skylights = .55  |
| Smoke/CO Alarms:        | Update smoke and carbon monoxide alarms to current State of Minnesota Building and Fire codes prior to final inspection.   |

**\*\*\*\*\* COMMERCIAL - COMPLETE THIS SECTION \*\*\*\*\***

|                     |  |
|---------------------|--|
| Structure Type:     | <input type="checkbox"/> Commercial <input type="checkbox"/> Residential (not IRC 1309) <input type="checkbox"/> Educational <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional        |
| Required Documents: | <input type="checkbox"/> Scope of Work statement <input type="checkbox"/> Plans <input type="checkbox"/> Material Specifications <input type="checkbox"/> Engineering (may also be required by Building Dept.) |
| Valuation:          | Estimated Value of Labor and Materials <input style="width: 50px;" type="text"/> \$ <input style="width: 100px;" type="text"/>   |

Permit becomes void if work does not begin within 180 days or is suspended at any time for over 180 days. Permits issued and inspections made by the city are a public service and do not constitute any representation, guarantee, or warranty, either implied or expressed, to any person as to the condition of the building or conformance to applicable construction codes. The Undersigned acknowledges that this application has been read and that the above is correct and agrees to comply with all the ordinances and laws of the City of Hugo. Periodic and/or a final inspection of this work are required by the Minnesota State Building Code.

**It is the responsibility of the applicant to call the City of Hugo Building Department at 651-762-6300 to schedule an inspection.**

**Applicant Signature**
**Date**

|                           |   |
|---------------------------|---|
| Calculated Permit Fee:    | \$ <input style="width: 80px;" type="text"/>            |
| State Surcharge:          | \$ <input style="width: 80px;" type="text"/>            |
| Technology Fee:           | <b>\$2.00</b> <input style="width: 80px;" type="text"/> |
| <b>Total Permit Cost:</b> | \$ <input style="width: 80px;" type="text"/>            |

**\*\*\*\*\* Office Use Only \*\*\*\*\***

|   |   |
|---|---|
| Received Date: <input style="width: 100px;" type="text"/> | Permit Number: <input style="width: 100px;" type="text"/> |
|---|---|